City of Lewiston

Application for Appointment to City Board/Commission/Committee

Full Name:_____

Street Address:_____

Mailing Address (if different):_____

Telephone Number: _____ (daytime) _____ (evening)

Email Address: _____

Length of time as a Lewiston Resident: _____ Council Ward: _____

I wish to be considered for appointment to the:

_____

(Name of Board/Commission/Committee)

Check one or both: _____Full Membership Status _____ Associate Membership Status

Educational Background: _____

_____

Employment History: _____

_____

Community Service: _____

_____

Please note any prior experience, knowledge or abilities that you have which would contribute to the activities of the Board/Commission/Committee:

_____

_____

Date: _____ Signature: _____

Thank you for your interest in serving the City of Lewiston.

Please return form to: City Clerk's Office, 27 Pine Street, Lewiston, ME 04240-7297

FOR USE BY CITY CLERK'S DEPARTMENT:

Date application received: _____

Received by: _____

Application submitted to: Mayor's Office Council President other

Date application submitted to above office: _____

Date appointed by Mayor/Council: _____

Date applicant notified by City Clerk's Office: _____

Date applicant sworn in: _____

Term to begin: _____

Term to expire: _____

Length of term: _____

If filling a vacancy, please note:

If no openings available at time of application, please note:

The City of Lewiston does not discriminate against or exclude individuals from it's municipal facilities and/or in the delivery of it's programs, activities and services based on the individual person's ethnic origin, color, religion, gender, sexual orientation, age, physical or mental disability, veteran status, or limited English speaking ability. For more information about this Policy, contact or call Compliance Officer Mike Paradis at (V) 207- 513-3003, ext.3412 (TTY) 513-3007, or email mparadis@ci.lewiston.me.us.