

COUNTY OF LEE
APPLICATION TO SERVE ON BOARDS//COMMISSIONS

If you are a Lee County citizen interested in serving as a member of one of the County's Advisory Boards, please complete the form below and mail to Clerk to the Board, (408 Summit Drive), PO Box 1968, Sanford, NC, 27331-1968 or fax to 919-718-4623. **YOU MUST BE A RESIDENT OF LEE COUNTY TO APPLY.**

BOARDS AND COMMISSIONS

- | | |
|--|---|
| <input type="checkbox"/> Sanford-Lee County Airport Authority | <input type="checkbox"/> Jury Commission |
| <input type="checkbox"/> Agriculture Advisory Board | <input type="checkbox"/> Library Board of Trustees |
| <input type="checkbox"/> Americans with Disabilities Act (ADA) | <input type="checkbox"/> Parks & Recreation Commission |
| <input type="checkbox"/> Board of Adjustments (Lee County) | <input type="checkbox"/> Planning Board (Lee County) |
| <input type="checkbox"/> Board of Adjustments (Sanford) | <input type="checkbox"/> Planning Board (Sanford) |
| <input type="checkbox"/> Board of Equalization & Review | <input type="checkbox"/> Senior Services Advisory Board |
| <input type="checkbox"/> Cemetery Board of Trustees | <input type="checkbox"/> Social Services Board |
| <input type="checkbox"/> CCCC Board of Trustees | <input type="checkbox"/> Transportation Advisory Board (COLTS) |
| <input type="checkbox"/> Juvenile Crime Prevention Council | <input type="checkbox"/> Industrial Facilities & Pollution Control
Financing Authority |
| <input type="checkbox"/> Fire Advisory Board | <input type="checkbox"/> Rest Home-Nursing Home Advisory Board (cannot have
a relative residing in a facility) |
| <input type="checkbox"/> Board of Health | |
| <input type="checkbox"/> Mental Health Board | |

NAME: _____

MAILING ADDRESS: _____

HOME PHONE: _____ WORK PHONE: _____ E-MAIL _____

YEARS LIVING IN

LEE COUNTY: _____ DISTRICT YOU LIVE IN: _____

MALE: ___ FEMALE: ___ WHITE: ___ BLACK: ___ HISPANIC: ___ NATIVE AMERICAN ___ OTHER ___
(Information for the purpose of assuring a cross section of the community)

EMPLOYER: _____

OCCUPATION: _____

OTHER MUNICIPAL OR COUNTY BOARDS/COMMITTEES ON WHICH YOU ARE SERVING:

(Generally, the Board of Commissioners desires to broaden participation on Boards/Commissions for as much citizen involvement as possible; therefore per Board policy, appointees can serve on no more than two (2) Boards/Commissions at a time.)

Are you related to anyone currently serving on any County board/commission? If yes, please state name and board they serve on

PLEASE LIST THREE (3) LOCAL PERSONAL REFERENCES AND PHONE NUMBERS:

1. _____
2. _____
3. _____

REASON(S) YOU WISH TO SERVE _____

(Attach additional page if more space is needed)

SIGNATURE: _____ DATE: _____

NOTE: ALL TAXES MUST BE PAID IN FULL BEFORE BEING CONSIDERED FOR APPOINTMENT

THIS APPLICATION IS CONSIDERED A PUBLIC RECORD