

Volunteer Board Information and Interest Sheet

Craven County, North Carolina

Names of board, committee, authority, etc., in which you are interested. Please list in order of priority:

Name:	_____	Home Phone:	_____
Home Address:	_____		

City:	_____	Zip Code:	_____
Township:	_____	City Limits:	_____ Yes _____ No
Occupation:	_____	Business Phone:	_____
Place of Employment:	_____	Fax Number:	_____
E-Mail Address:	_____		

(Please indicate your preferred contact number.)

Education

Business and Civic Experience

Areas of Expertise, Interest, Skills

Why do you want to serve?

(A resume may be attached to this form, but will not be accepted in lieu of the form.)

Date: _____

Signature

The Craven County Board of Commissioners sincerely appreciates the interest of all citizens in serving their county. For more information on the responsibilities of various boards, you may view the on-line board descriptions or contact the County Clerk's Office at (252) 636-6601. RETURN FORM TO: CRAVEN COUNTY CLERK, 406 CRAVEN STREET, NEW BERN, NC 28560. The form may also be sent via e-mail (gbryan@cravencountync.gov) or fax: (252) 637-0526.

This form will remain active until two years after date received.

For Internal Use Only

Date Received: _____

Form is active until: _____ (two years after date received)

Received by: _____ (initials)

Reviewed by the following Commissioners. Please initial and add "PA" if you are personally acquainted with the individual.
