



Town of Essex

Application to serve on a Board or Commission

Name:	
Address:	
Home Phone:	Cell Phone:
Email:	
Board or Commission you are interested in:	
How long have you been an Essex resident?	
Are you a registered voter in Essex?	
Political Party Affiliation: <input type="checkbox"/> Republican <input type="checkbox"/> Democrat <input type="checkbox"/> Other	
Education:	
Occupation:	
Employer:	
Municipal/Civic Experience:	
Why are you interested in serving on this Board/Commission?	
Please provide any additional information that you think would be helpful in processing your application.	
Signature:	Date: