



Committee Appointment Application

Committee Selection: _____

Name: _____

Address: _____

Email: _____ Phone: _____

Please describe your interest in serving on this committee.

Please provide any background information that would be of interest to the Town when considering your application, including previous service or other relevant experience.

Are you aware of any conflicts that may arise, affecting your service on this committee? **Yes** **No**

If yes, please explain: _____

Are you aware of the meeting schedule and able to commit to regular attendance? **Yes** **No**

After submitting this application for appointment:

- The application will be reviewed by the Board of Selectmen and you may be scheduled for an interview.
- Following the interview, the Selectmen will vote on your potential appointment at their next regular meeting.
- If appointed, you will receive confirmation from the Town Clerk and will be required to take an oath of office prior to your service on the committee.

Signature: _____ Date: _____

Please submit to: Town Clerk, Town of West Bath, 219 Foster's Point Rd, West Bath ME 04530 or by email: townclerk@westbath.org.