**COUNTY OF GRANVILLE**

**BOARDS/COMMISSION APPLICATION**

***Name:***

***Mailing Address:***

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***Daytime Phone:*** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ***Evening Phone:***

***Email Address:***

***Employer:***

Are you a registered voter? 🞏 Yes 🞏 No

Do you live in: 🞏 District 1 🞏 District 2 🞏 District 3 🞏 District 4

🞏 District 5 🞏 District 6 🞏 District 7

(If you are not sure which District you live in, call the Granville County Board of Elections at 919-693-2515.)

I wish to be considered for appointment to the following Board/Commission:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Are you currently serving or have you ever served on a public board or commission? If so, please list below:

Board/Commission Dates

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(If appointed to a Board/Commission, all information contained in this application will become public knowledge.)

C:\wpdocs/Application-Board-Commission.wpd