



County of Bucks

Application for appointment to board, authority or commission

Please complete application and mail to:

Chief Operating Officer, 55 East Court Street, Doylestown, PA 18901

Name: _____

Address: _____

Home Phone: _____ Work Phone: _____

Email Address: _____ Municipality: _____

Which board, authority or commission are you interested in serving?

First choice _____

Second choice _____

Third choice _____

Why do you wish to serve on the above? _____

What is your employment/vocation/education background which pertains to your above selections? List any other pertinent information (membership in organizations, awards, appointive or elected governmental positions held, etc.) *You may attach a resume.*

Present employer & position _____

Education:

High School _____

College _____

Post-Graduate _____

Vocational _____

Military Serv. _____

How long have you resided in Bucks County? _____

Have you previously served on a board or authority? If yes, which one(s) and what dates?

It is important that members regularly attend meetings of the authority, board or commission to which they are appointed. Failure to attend regular meetings without a valid reason may result in removal.

By putting your first and last name below, you are officially signing this document and all it entails.

Signature:

Date: