



Town of Nederland

Application for Appointment to the Board of Trustees

Applicant Name: _____

Mailing Address: _____

Street Address: _____

Phone: (Home) _____ (Mobile) _____

Email: _____

Please attach additional documentation including a personal statement and resume to describe any special knowledge, abilities, background or interest which you feel will provide a positive contribution to the goals and purposes of the Board of Trustees and the Town of Nederland. Return application to Town Clerk.

Signature of Applicant

Date

For Office Use Only

Received by: _____ Date: _____

Date of Appointment: _____ Term Length: _____

Expiration of Term Date: _____

Approved: _____ Denied: _____ Date : _____