

Town of Roseboro

101 W Pleasant Street - Roseboro, NC 28382

APPLICATION FOR APPOINTMENT: BOARD OF COMMISSIONERS

Note: All information on this document will be released to the public on request.

The Town of Roseboro considers applicants for all positions without regard to race, color, religion, creed, gender, national origin, age, disability, marital or veteran status, or any other legally protected status.

ast Name	First Name	Middle	DOB
ddress	City	State	ZIP
Iome Phone Number	Mobile Phone Number	E-mail Address	
. EDUCATION	• 1 , • •		10 mm
ligh School Attended	Address	Course of Study	Year Completed
College Attended	Address	Course of Study	Year Completed
. WORK EXPERIEN	NCE		
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Current Employer	Address	Dates of Employment	
Supervisor Name	Duties		
Previous Employer	Address	Dates of Employment	
Supervisor Name	Duties		
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Previous Employer	Address	Dates of Employment	
Supervisor Name	Duties		

4. AFFIRMATION OF ELIGIBILITY A. Do you live within the town limits of Roseboro? Yes_____ No____ If yes, for how long?_____ **B.** Are you a registered voter? Yes No C. Has any charge of professional misconduct, criminal misdemeanor or felony ever been filed against you? Yes No If yes, please explain: D. Do you have any relatives that are employed by the Town of Roseboro? Yes____ No___ If yes, please indicate your relation to the employee:_____ E. Do you currently hold any civil, political or state office requiring the Constitutional Oath of Office? Yes____ No___ If yes, please list:___ F. Are all of your property tax listings current? Yes No G. Are your Roseboro property and motor vehicle taxes paid in full on a current basis? Yes No H. Is your water bill paid in full on a current basis? Yes No I. Do you have any delinquent or outstanding debts owed to the Town of Roseboro? Yes No Based on your qualifications and experiences, briefly describe why your services on this Board would be beneficial to the Town of Roseboro and its citizens: I understand this application is public record and I certify that the facts contained in this application are true and correct to the best of my knowledge. I authorize and consent to background checks and to the investigation and verification of all statements contained herein as deemed appropriate. I further authorize all information concerning my qualifications to be investigated and release all parties from all liability for any damages that may result from this investigation. I understand regular attendance to Town meetings is important. This form will remain on file in the Office of the Clerk. Signature:

Date: