



APPLICATION FOR APPOINTMENT TO A TOWN OF BOSCAWEN  
BOARD, COMMITTEE OR COMMISSION

116 North Main Street, Boscawen, NH 03303 | 603 753-9188x2309 | keasler@boscawennh.gov

Please circle the Board, Committee or Commission you are interested in:

Advisory Budget Committee  
Agricultural Commission  
Beautification Committee  
Conservation Commission  
Economic Development Committee

Energy Committee  
Old Home Day Committee  
Planning Board  
Public Safety Advisory Committee  
Zoning Board of Adjustment

The Select Board shall appoint Members and Alternate Members that will be a representation of all types of residents.

When there is a vacancy, the Board shall advertise and invite qualified individuals to submit a letter of interest. The Select Board and two appointed members shall act as a committee to review the applications and recommend individuals to fill the vacant position(s). Criteria for selection shall be the individual who best represents the community, is willing to attend meetings and work to meet the vision and objectives of the Town of Boscawen.

Eligibility to become a member:

- 1. Must be a registered voter
- 2. Cannot be an employee of the Town

Please print:

Name: \_\_\_\_\_  
(First, Middle, Last)

Home Phone #: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

Work Phone #: \_\_\_\_\_

Address: \_\_\_\_\_  
(City, State, Zip)

Email: \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Please complete the questionnaire and return both pages to the Town of Boscawen at 116 North Main Street, Boscawen, NH 03303, the Town Administrator's Office, or [kphelps@boscawennh.gov](mailto:kphelps@boscawennh.gov).



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Are you applying to become a Member \_\_\_\_ or Alternate Member \_\_\_\_

Why do you want to serve on a Town of Boscaawen Board, Committee or Commission?

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

What strengths would you bring to the Board, Committee or Commission?

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

What are your principle interests in the Board, Committee or Commission?

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

Are you available to attend evening meetings on a monthly, semi-annual, or quarterly basis (dependent upon the Board, Committee or Commission of your choosing)?

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

If appointed, I will fulfill my duties as a Member or Alternate Member to the best of my ability.

\_\_\_\_\_  
Signature

Received By: \_\_\_\_\_ Date: \_\_\_\_\_

Approved By: \_\_\_\_\_ Date: \_\_\_\_\_

Appointment Letter Completed: \_\_\_\_\_ Expires: \_\_\_\_\_