

APPLICATION TO SERVE ON BOARDS SPRINGFIELD TOWNSHIP BUCKS COUNTY, PENNSYLVANIA

 Last Name	First Name	 Initial
LOCATION OF RESIDENCE	Ē:	
MAILING ADDRESS:		
HOME PHONE: WORK PHONE:		
E-MAIL ADDRESS:		
NUMBER OF MONTHS/Y	EARS RESIDENCE IN SP	RINGFIELD TOWNSHIP:/
OCCUPATION:		
INTERESTED IN SERVING	ON THE FOLLOWING E	BOARD:
Planning Comn	nission	Zoning Hearing Board
Community Da	у	Environmental Advisory Council
Park & Recreat	ion Board	Agricultural Security Board
Historic Comm	ission	Other
EDUCATION:		
PREVIOUS SPRINGFIELD	TOWNSHIP BOARDS OI	R COMMITTEES SERVED:
		year(s)
		year(s)
		g of the board for which you applying?
Will you commit to atter	nding at least 80% of th	ne meetings?
Will you be available to a	attend a Board of Supe	rvisors meeting discussing
appointment(s) to answer any questions?		

OTHER RELEVANT WORK/VOLUNTEER EXPERIENCE Organization Position Year STATEMENT OF QUALIFICATIONS Please provide a brief statement indicating why you are interested in serving on the Board in question and why you are qualified for the appointment. Attach another sheet if you like. Signature Date

Please note: This form will remain on file until notice from you or for a period of (2) years.

The completed form can dropped off or mailed to: 2320 Township Rd., Quakertown, PA 18951 or emailed to: info@springfieldbucks.org

Revised 2020.5.29