



**APPLICATION FOR CONSIDERATION OF APPOINTMENT TO  
TOWN OF SYLVA BOARDS OR COMMISSIONS**

**Applicants are strongly urged to attend several meetings of a board prior to applying  
and/or appointment to a board.**

NAME \_\_\_\_\_ DATE \_\_\_\_\_

ADDRESS \_\_\_\_\_

EMAIL \_\_\_\_\_

HOME PHONE \_\_\_\_\_ WORK PHONE \_\_\_\_\_

EMPLOYER \_\_\_\_\_ OCCUPATION \_\_\_\_\_

EMPLOYER'S ADDRESS \_\_\_\_\_

DO YOU LIVE WITHIN THE MUNICIPAL LIMITS OF SYLVA? \_\_\_\_\_

DO YOU LIVE WITHIN THE EXTRA TERRITORIAL ZONING DISTRICT? \_\_\_\_\_

NAME OF BOARD OR COMMISSION FOR WHICH YOU ARE APPLYING TO SERVE ON:  
\_\_\_\_\_

PLEASE LIST ANY SPECIAL SKILLS, INTEREST OR QUALIFICATIONS WHICH YOU FEEL  
WOULD BE AN ASSET TO SAID BOARD OR COMMISSION:

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

WHY DO YOU WISH TO SERVE ON SAID BOARD OR COMMISSION?

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

**PLEASE RETURN THIS APPLICATION TO TOWN HALL  
83 ALLEN STREET, SYLVA, NC 28779**