

CITIZENS VOLUNTEER FOR SERVICE APPLICATION

Boards, Commissions or Authorities

Town of Port Royal selects citizens for service on Council appointed Boards, Commissions and Authorities from a roster of individuals who have either volunteered or have been recommended for appointment. The Clerk to Council uses this form to keep an up-to-date roster of volunteers and to give Council basic information about each volunteer.

DATE: _____ NAME: _____ VOTER REGISTRATION #: _____

OCCUPATION: _____ TELEPHONE (Home) _____ (Office) _____ (FAX) _____

Email address: _____

HOME 911 ADDRESS: _____ MAILING ADDRESS: _____

- Are you presently serving on a Board, Commission or Authority? _____ If “yes”, when does your term expire? _____
- If recommended by a Council Member, indicate name: _____

TOP THREE PRIORITIES: Please indicate by placing a “1”, “2” or “3” alongside the Board, Commission or Authority which you choose.

REGIONAL BOARDS & AUTHORITIES	TOWN BOARDS AND COMMISSIONS
<input type="checkbox"/> Accommodations Tax <input type="checkbox"/> Alcohol and Drug Abuse <input type="checkbox"/> Aviation <input type="checkbox"/> Beaufort Housing Authority <input type="checkbox"/> Corridor Review (S.C. Hwy 170) <input type="checkbox"/> Corridor Review (U.S. Hwy 278) <input type="checkbox"/> Disabilities and Special Needs <input type="checkbox"/> Economic Development <input type="checkbox"/> Historic Preservation Commission <input type="checkbox"/> Library <input type="checkbox"/> Parks and Leisure Services <input type="checkbox"/> Planning <input type="checkbox"/> Solid Waste <input type="checkbox"/> Tax Equalization <input type="checkbox"/> BJ Water and Sewer <input type="checkbox"/> Lowcountry Council of Governments	<input type="checkbox"/> Housing Advisory Committee <input type="checkbox"/> Design Review Board <input type="checkbox"/> Design Review Board – Shell Point Extended <input type="checkbox"/> Redevelopment Commission <input type="checkbox"/> Zoning Board of Adjustments and Appeals <input type="checkbox"/> Municipal Election Board <input type="checkbox"/> Joint Municipal Planning Commission

CONFLICT OF INTEREST STATEMENT: I, _____, AS A VOTING MEMBER OF THE _____ Board, Commission or Authority, agree to disqualify myself from voting on any issue(s) which may arise and in which a Conflict of Interest exists. APPLICANT’S SIGNATURE: _____

Once completed please return this form and attach a brief resume’ to : Clerk to Council, P.O. Drawer 9, Port Royal, SC 29935. Applications without a brief resume’ cannot be considered. Applications will be held five (5) years for consideration. All information contained on this application is subject to public disclosure.

An incomplete application will be returned.