



**Application for Martin County Board of Commissioners'
Boards/Commissions/Committees Appointment(s)**

If you are a Martin County citizen interested in serving as a member of one of the County's Advisory Boards, please, **ENTIRELY** complete the form below. Forms may be submitted by mail: Martin County Manager's Office, Attn: Clerk to the Board, P. O. Box 668, Williamston, NC 27892, by fax 789-4309 or by email: jrease@martincountyncgov.com. **YOU MUST BE A RESIDENT OF MARTIN COUNTY TO APPLY.** There is no monetary compensation for service on most of these boards. **Some of these boards/commissions meet during the day. Please check the meeting schedule of the particular board you wish to apply for before submitting an application.** You may call 789-4300 for information concerning these boards.

	The following Boards/Committees have specific categories of membership:
Alcoholic Beverage Control (ABC)	Ambulance Services Advisory Council
Airport Commission	Community Child Protection Team
Animal Control Board of Appeals	Economic Development Council, Inc. (Headstart)
Bertie-Martin Regional Jail Commission	Home & Community Care Blk. Grant Committee
Beaufort Hyde Martin Regional Library	Juvenile Crime Prevention Council (JCPC)
Choanoke Area Dev. Association (CADA)	Martin-Tyrell-Washington(MTW) District Health
Community Advisory Committee (Nursing Homes and Family Care Facilities)	Martin County Regional Water & Sewer Authority (MCRWASA)
Council on Aging	Mental Health Board
Economic Development Corporation	Region Q Workforce Development Board
Human Relations Council	Transportation Advisory Board
Industrial Facilities & Pollution Control Financing Authority	Tourism Development Authority (TDA)
Jury Commission	Water District Advisory Boards
Martin Community College Board of Trustees	
Martin General Health Systems	
Mid-East Commission	
Mid-East Regional Housing Authority	
Social Services Board	
Women's Council	

****PLEASE PRINT OR TYPE****

PLEASE LIST THE BOARD(S)/COMMISSION(S) ON WHICH YOU WOULD BE WILLING TO SERVE:

1. _____ 2. _____

3. _____ 4. _____

NAME: _____ **DATE:** _____

ADDRESS: _____ **CITY/STATE:** _____ **ZIP:** _____



Last Name: _____

TELEPHONE: Home: _____ Work: _____

OCCUPATION: _____

PLACE OF EMPLOYMENT: _____

EDUCATIONAL BACKGROUND: _____

Are you currently serving in one or more *Appointed* or *Elected* positions in any Federal, State or local government agency? Yes [] No []

If so, please give the following information: Position: _____

Organization: _____

Date Term Ends: _____

Are you a graduate of a leadership program? Yes [] No []

If so, please name: _____

WE ASK YOUR HELP IN ASSURING DIVERSITY OF MEMBERSHIP BY AGE, GENDER AND RACE, BY ANSWERING THE FOLLOWING QUESTIONS: Male [] Female []

ETHNIC BACKGROUND: African American/Black [] Caucasian/White [] Hispanic []
Asian American [] Other _____

ARE YOU AT LEAST 18 YEARS OF AGE? Yes [] No []

If an applicant is not selected, their application will remain on file for two (2) years, and will be considered by the Commissioners when reviewing and making appointments.

Pursuant to North Carolina General Statutes Chapter 132, Public Records, this document may be considered public record and as such is subject to request and review by third parties.