## PERSONAL INFORMATION

Name:	DATE:	
MAILING ADDRESS (P. O. Box or Street)		
Town and Zip Code:		
HOME ADDRESS (if different than above)		
Town and Zip Code		-11
Home Phone	Cell phone:	
Email Address		

Which Board of Commissioners district do you reside in? You can use the map below or to look up your voter record, visit !

District 1	District 2	District 3	District 4 🗌	District 5
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	THIS PHA	Mada	A Port	District 1
	District 4	En t	A CAR	
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	्रमिति	REMER		
	日本代入	District 3		S.d.
-	化准成	Kest	Art	District 2
	District S	Stat	and the	
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2	MACK Co	S.S.		
	The real sector sector			
Are you currently serv	ing on a board or co	ommittee in Cha	tham County?	Yes No
If yes, which one(s):				

Agriculture Advisory Board	Library Advisory Committee
Affordable Housing Advisory Committee	Appearance Commission
Nursing & Adult Care Home Committee	Board of Equalization & Review
Planning Board	Board of Health
Recreation Advisory Committee	Board of Social Services
Transportation Advisory Committee	Climate Change Advisory Committee
Zoning Board of Adjustment	Environmental Review Advisory Committee
OTHER:	

Why do you wish to serve the county in this capacity?

# EDUCATION

Please list your educational background. Include names of schools and degrees held.

#### CURRENT OR MOST RECENT EMPLOYMENT

Name of Employer:	
Address of Employer:	
Position:	

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

### CIVIC INVOLVEMENT

Please list the names of the civic organizations in which you currently hold membership:

#### DEMOGRAPHIC INFO (OPTIONAL)

We ask your help in assuring the diversity of membership on our boards and committees. This section is optional, and you may leave it blank.

GENDER:	ETHNIC ORIGIN/RACE:	
Male 🗌	White, non-Hispanic	Asian or Pacific Islander
Female	African-American	Native American
	Hispanic 🗌	Other 🗌
Year of Birth		