

**TOWN OF BELLINGHAM
APPLICATION FOR APPOINTMENT**

Date: _____

Position Sought: _____

Name: _____

Home Phone: _____

Address: _____

Work Phone: _____

Are you a registered voter in Bellingham? _____

How long have you resided in Bellingham? _____

Occupation: _____

Reasons for seeking this position: _____

Special education or experience which would qualify you for this position: _____

Is there any time you would NOT be available for meetings and other duties? _____

Additional Comments: _____

Please Complete Form and return to:
Town of Bellingham
Board of Selectmen
10 Mechanic Street
Bellingham, MA 02019