

Town of Maxton
P.O. Box 99
Maxton, NC 28364
910 844-5231

NOTIFICATION OF INTEREST TO SERVE ON AN APPOINTED BOARD (RESUME)
Please feel free to attach a resume or additional information if so desired.

BOARD *Applying for:* _____

NAME: _____

ADDRESS: _____

My personal residence is located within Maxton Town limits Yes No (circle one)

TELEPHONE: _____ (HOME) _____ (WORK)

PRESENT OCCUPATION: _____

EDUCATIONAL BACKGROUND: _____

Please list below your personal, professional, or organizational activities related to the board/commission you are interested in. _____

Please list any other education, skills, training, or experience that you have which you consider advantageous to your work on the board/commission you are interested in. _____

List previous or current service on other Board(s)/Commission(s): _____

Note: Upon submission to the Town, the information contained herein becomes a matter of public record per NCGS 132-1.

Resumes to Serve on Town Boards will remain active for six (6) months from date received in the Town Clerk's Office.

If I am appointed to serve on one or more boards, I will agree to attend the required number of meetings each calendar year and not to exceed unexcused absences as set forth by the Town Ordinances, Sec. 2-145.

AUTHORIZATION FOR RECORDS CHECK:

Pursuant to Sec. 2-143, Town Ordinances, by signing and submitting this Notification of Interest, I hereby authorize the Town of Maxton, its employees, agents, or contractors, to obtain a confidential records check. This authorization and consent is given voluntarily, and with a full understanding of its possible consequences, and is intended to

authorize a complete criminal records background check, as allowed under state and federal law, including without limitation, the Fair Credit Reporting Act.

AFFIRMATION OF ELIGIBILITY:

Have you ever pled guilty or nolo contendere to or been convicted of any criminal offense, other than a minor traffic violation such as speeding?

Yes ___ No ___ If yes, please identify all such offenses by name, jurisdiction, date, and type of disposition:

Are there any possible conflict of interest or other matter which could create problems or prevent you from fairly and impartially discharging your duties as an appointee of the Town of Maxton Board of Commissioners?

Yes ___ No ___ If yes, please explain:

I understand that this Notification of Interest is a public record, and I certify that the facts contained herein are true and correct to the best of my knowledge.

DATE: _____

SIGNATURE: _____

Please bring completed Notification of Interest and any attachments to Town Hall, 201 McCaskill Avenue, or mail to P.O. Box 99, Maxton, North Carolina 28364

FOR OFFICE USE ONLY:

Date Received: _____

Date forwarded to Board of Commissioners: _____