

**TOWN OF SUMMERVILLE
APPLICATION FOR BOARDS/COMMISSIONS**

(Board/Commission you are applying for)

Applicant's Name: _____

Home Address: _____

Contact Telephone: _____

Email: _____

Do you reside within the limits of the Town of Summerville or own real property within the corporate limits of the Town? Yes No

State your interest in serving on this Board/Commission: _____

Have you ever served on a Board or Commission for the Town of Summerville? Yes No

If yes, provide information: _____

Have you ever served on a Board or Commission for another city, county or state? Yes No

If yes, provide information: _____

Have you ever served as an elected official of a local government? Yes No

If yes, specify what type of service:

Education: _____

Occupation (If retired, state former occupation): _____

Please describe how your educational background, work experience, or other life experience qualifies you to contribute to the mission of this Board: _____

Professional Affiliations: _____

Service Club/Association Memberships: _____

Is there any way that you or a member of your family would stand to benefit financially by your service on this Board or Commission? Yes No

If yes, explain: _____

Please attach your resume or include any other information you feel would be helpful.

Date: _____ Signature: _____

**Return to: Office of the Mayor ATTN: Mayor Wiley Johnson
200 S. Main Street, Summerville SC 29483**

**Contact: MayorJohnson@SummervilleSC.gov
Office: (843) 851-4239 | Cell: (843) 607-0872**