



**TOWN OF WAREHAM**  
**54 Marion Road**  
**Wareham, Massachusetts 02571**  
291.3100

**APPLICATION FORM**  
**BOARD, COMMITTEE OR COMMISSION**

If you are interested in serving the Town in any capacity, complete this form and return to the Board of Selectmen's Office, 54 Marion Rd. Wareham Massachusetts 02571. Information received will be available to all Town boards and officials. Submission of this form in no way assures an appointment.

Committee/Board/Commission of interest for consideration to serve: \_\_\_\_\_

Alternate Committee (s): \_\_\_\_\_

Name: \_\_\_\_\_ Physical address: \_\_\_\_\_

Mailing address(if different): \_\_\_\_\_ Home phone: \_\_\_\_\_

Work phone: \_\_\_\_\_ Ext. \_\_\_\_\_ Cell phone: \_\_\_\_\_

E-mail: \_\_\_\_\_ Registered to vote? \_\_\_\_\_ Name of town: \_\_\_\_\_

Number of hours available per week or per month: \_\_\_\_\_

Present business and/or work affiliations: \_\_\_\_\_

Business experience: \_\_\_\_\_

Special training or qualifications (attach additional information): \_\_\_\_\_

Town offices held in Wareham or elsewhere: \_\_\_\_\_

Are you a U.S. Citizen? \_\_\_\_\_

I hereby certify:

I am a full-time resident of the Town of Wareham.

I have been provided a summary of Massachusetts General Law 268A (conflict of interest) and have read the material provided, and to the best of my understanding have no potential or actual conflict of interest and;

I have been provided with the Board of Selectmen Policy #05-01 and having read the material agree to the requirement of obtaining ethics training and state-sponsored training (if any) for each term I am appointed.

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF APPLICANT

In the event you cannot sign this statement, but are requesting to be considered for an appointment, please provide an explanation.

**It is highly recommended that you attend at least three meetings on any board, committee or commission you wish to serve prior to being appointed.**

