

**RESUME FOR APPOINTMENT
TO A TOWN OF VERNON AGENCY,
BOARD, COMMITTEE, COMMISSION OR AUTHORITY**

Name:

Address:

Home Telephone:

Work Telephone:

Email Address:

Educational Background:

Employment Experience:

Civic Activity:

Personal Data/Comments:

Political Affiliation:

Democrat

Republican

Unaffiliated

Other

I hereby request that I be considered for appointment to:

Date: _____ **Signature:** _____

This form should be returned to: Office of the Mayor, Memorial Building, 14 Park Place, Vernon, CT 06066.

Please list any other Commission, Committee, or Authority that you are a member of:

If you were not appointed to a Town of Vernon Commission, would you like your resume distributed to the local Non-Profit Agencies?

Yes

No

For Office Use Only:

Commission or Committee Appointment: _____

Term #1 From: _____ To: _____ Un-Expired Expired

Term #2 From: _____ To: _____ Un-Expired Expired