



Application for Appointment to Fletcher Town Council

Name: _____

Address: _____

Phone Number: Home/Cell _____ Work: _____

Employer: _____ Occupation: _____

Years in Position: _____ Job Title: _____

E-Mail Address: _____

Do you reside in the town limits of Fletcher? Yes ___ No ___

Length of Residency _____

Are you a registered voter in Henderson County? Yes ___ No ___

Which Fletcher Council District do you reside in? _____

Why do you want to serve on the Town Council? _____

Why do you think that you would be an asset to this council? _____

Comments: _____

Affirmation of Eligibility

Have any formal charge of professional misconduct, criminal misdemeanor or felony ever been filed against you in any jurisdiction? Yes _____ No _____ If yes, please explain disposition: _____

Are there any conflict of interest or other matter(s) that would create problems or prevent you from fairly and impartially discharging your duties as a member of the Town Council? Yes _____ No _____ if yes, please explain _____

Are you currently serving on any other Board/Commission/Committee?

No _____ Yes _____

Local Government _____
Board/Commission/Committee _____

Date Appointed _____ Term Expiration _____

Do you have any prior experience with a Local Government Agency?

Yes _____ No _____ If yes, please explain _____

I understand this application is public record and I certify that the facts contained in this application are true and correct to the best of my knowledge.

I understand that regular attendance at Council meetings is essential to conscientious representation of the residents of the District and the Town of Fletcher, and that should I be appointed to Council, I will be responsible for representing the best interest of the residents of my District as well as all the residents of the Town of Fletcher.

I understand that should I be appointed to Council, full disclosure of conflicts of interest and potential financial gain from any matter brought before Council must take place prior to any discussion or vote, and that when deemed appropriate, I must rescues myself from discussion and action taken by Council.

Signature: _____ Date _____

Return completed form to:

Town of Fletcher
Attn: Town Clerk
300 Old Cane Creek Road
Fletcher, NC 28732
Phone: 687-3985 Fax: 687-7133