



## Nomination/Appointment

Board or Commission you're applying for

NAME \_\_\_\_\_ DATE: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_

EMPLOYER: \_\_\_\_\_

BUSINESS ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_

E-mail address: \_\_\_\_\_

COUNTY BOARDS OR COMMITTEES PRESENTLY SERVING ON:

\_\_\_\_\_

BUSINESS AND CIVIC EXPERIENCE:

\_\_\_\_\_  
\_\_\_\_\_

*For the purpose of diversity and balance on the County's Boards and Commissions, please complete the following:*

*I am a resident of the County from the Central \_\_\_\_\_ East \_\_\_\_\_ West \_\_\_\_\_*  
(check one)

*I have been a resident of Swain County for \_\_\_\_\_ years.*

Return this form to:

Swain County Board of Commissioners

Attn: County Manager, Kevin King

101 Mitchell Street

PO Box 2321

Bryson City, NC 28713

Phone: (828) 488-9273 FAX (828) 488-2754

\_\_\_\_\_  
Signature of Applicant

*I Understand that this application will be kept on active file for one year only.*

Swain County does not discriminate on the basis of race, color, religion, sex, age, national origin, handicap, or disability in admission or access to or treatment or employment, in its services, programs, and activities in compliance with applicable federal and state laws.