

TOWN OF BECKET

557 Main St.

Becket, MA 01223

(413) 623-8934 ext. 10

**Appointment Application**

TO: Board of Selectmen:

Please accept this application for  **1. Appointment** or  **2. Reappointment** to:

\_\_\_\_\_ (Committee/Board/Commission)

Name: \_\_\_\_\_

Residential Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Tel. No.: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Current employment: \_\_\_\_\_

**1. If you are requesting Appointment, please complete the following questions:**

- Have you ever attended a meeting of the committee/board/commission?

\_\_\_\_\_

- Why are you interested in this committee/board/commission?

\_\_\_\_\_

- What experience, skills or insight would you bring to the committee/board/commission?

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\_\_\_\_\_

- Are you prepared to commit to the meeting schedule of the committee/board/commission?

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- What would you hope to accomplish on the committee/board/commission?

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**2. If you are requesting Re-appointment, please complete the following questions:**

- What has been your level of attendance at committee/board/commission meetings?

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- What have you brought to the committee/board/commission in terms of experience, skills, ideas, insight?

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- How do you feel you have helped the committee/board/commission in its goal(s)/mission?

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- Why do you want to continue serving on the committee/board/commission?

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**Signature**

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**Date**

Please save completed application and send via email to [secretary@townofbecket.org](mailto:secretary@townofbecket.org).  
Thank you.