

**BOARDS, COMMITTEES AND COMMISSIONS**

**APPLICATION**

Please complete this application in its entirety and return to the address below:

**Town of Pelzer**

**P.O. Box 427**

**Pelzer, SC 29669**

All applications will be considered by the Town Council and appointees will be mailed written confirmation of Council's decision.

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

Board (s) and/or committee(s) in which you are interested:

1. \_\_\_\_\_

2. \_\_\_\_\_

Physical Address and Mailing Address, if different:

Physical - \_\_\_\_\_

Mailing - \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Preferred method of contact: \_\_\_\_\_

Highest Level of Education: \_\_\_\_\_ High School Grad: Yes or No

GED Equivalent: Yes or No

College Attended: \_\_\_\_\_ Degree: \_\_\_\_\_

Employment History:

<u>EMPLOYER</u>	<u>POSITION</u>	<u>EMPLOYMENT DATES</u>
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**Qualifications required -**

- Town of Pelzer resident for at least a year - \_\_\_\_\_
- Registered voter in the Town of Pelzer prior to his/her election - \_\_\_\_\_
- Must be interviewed by all members of the Pelzer Town Council

- Must complete all required training within 120 days of being elected for position -  
\_\_\_\_\_
- Failure to do so, the office shall be deemed vacant and another election for that seat will be held.

Signature of Applicant/ Date

Recommendation of Council: \_\_\_\_\_