



**APPLICATION FOR APPOINTMENT
TO NEW LONDON BOARD OR AGENCY**

Date of Application_____

Board, Commission or Agency_____

Name_____

Home Address_____

Home Phone Number_____ Work Phone Number_____

(Current occupation and place of employment. If retired, indicate former occupation).

Political Affiliation_____

Please indicate why you would like to serve_____

(Please use reverse side if additional space is needed).

I understand the duties of this Board, Commission, or Authority and agree to actively participate if appointed.

Applicant's Signature

Please return the completed form to: City Clerk, 181 State Street, New London, CT 06320

This application will be kept on file for one year. After which, you will be contacted for renewed interest in maintaining your application in an active status.