

Town of Hopkinton, NH Office of Selectmen • 330 Main Street • Hopkinton, NH 03229-2627

Telephone: (603) 746-1005

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Web Address: www.hopkinton-nh.gov

APPLICATION FOR APPOINTMENT

Name:		Date:
Address:		
Home Phone:	Work Phone:	Cell Phone:
E-mail Address:		
How long have you lived i	n Hopkinton?	
Is Hopkinton your exclusiv	re domicile? Yes No	
lf no, explain:		
	n you are interested in being appo	inted to. (Please list in order of preference
1		
2		
3		
Are you regularly able to a	attend Board/Committee meetings	? Yes No
Please provide a brief exp position:	anation for your interest in appoi	ntment to a particular board, committee or

	formation about yourself. (Please include your experience/work ce pertaining to the appointment for which you are applying. Pleas
address any potential conflicts of i	
	
Please provide below the names a	nd telephone numbers of up to three personal references:
Name:	Phone:
Name:	Phone:
Name:	Phone:
I certify that there are no willful r questions.	nisrepresentations of the above statements and answers to the
Signature:	·
Date:	
Thank yo	u for your interest in serving the Town.

Please return signed application to:

Town Administrator Town of Hopkinton 330 Main Street Hopkinton, NH 03229