TOWN OF ABINGTON MUNICIPAL VOLUNTEER FORM

The Town of Abington depends on volunteers for its Boards, Committees, and Commissions and a variety of other activities. Please use this form to express your interest in volunteering to serve in any of these areas. Please complete this form and submit it to the Office of the Board of Selectmen, 500 Gliniewicz Way, Abington, MA 02351, or you can email it to djamieson@abingtonma.gov. Should you have any questions please feel free to contact the Selectmen's Office at 781-982-2100.

Name: _____ **Date:** _____

Address: _____

Telephone No.: (H) _____ **(w)** _____

E-Mail Address: _____

1. Are you a registered voter in Abington? _____

Town Boards, Commissions, Committees:

Arts Council (7), (3 alternates)
Commission on Disabilities (3)
Council on Aging (12)
Housing Partnership (3)
Open Space Committee (6)
Registrar of Voters (3)
South Shore Regional School District (1)
Zoning Board of Appeals (3), (2 alternates)
Cable Advisory Committee (3)
Conservation Commission (7), (alternates)
Griffins Dairy Committee (5)
Historical Commission (4)
Southfield Redevelopment Authority (2)
SAGE (9)
Summer Concerts (3)

Committee Liaisons:

MBTA Committee
OCPC Delegate and Alternate

2. Please mark your two choices in order of preference:

A. _____ B. _____

3. Why do you want to serve on these particular Boards, Committees or Commissions?

_____

_____

_____

4. Have you attended any meetings of these Boards, Committees or Commissions?

_____

5. Have you attended Town Meeting? Yes ____ No ____

6. Have you ever served on a Board, Committee or Commission in the Town of Abington?

   Yes ____ No ____

7. If you answered "yes" to #6, please list the Boards, Committees and/or Commissions you have served on:

   A. _____ Dates: _____

   B. _____ Dates: _____

8. Please list any skills or specialized knowledge you can bring to these Boards, Committees or Commissions.

   _____

   _____

   _____

9. Please feel free to provide any additional information you think may be helpful in reviewing your application.

   _____

   _____

   _____

   _____

I will read a copy of the Massachusetts General Laws Chapter 268A "Conflict of Interest" provided by the Town Clerk, if appointed, and to the best of my ability agree to abide by the provisions of the statute.

_____

Signature