Town of Orchard Park
Committee/Board Interest Form

Date: ___________________
Name: ____________________________________________________________
Address: __________________________________________________________________
Home Phone: ___________________ Work: ___________________ Cell: ___________________
E-Mail: __________________________________________________________________

Check Committee(s)/Board(s) of interest:

Architectural Overlay District ___ Ethics Board ___ Recreation Commission ___
Assessment Review Board___ Historic Preservation Board___ Scenic Byways ___
Comprehensive Plan Board___ Insurance Advisory Board ___ Senior Services ___
Computer Tech Advisory___ Library Board___ Trails Task Force ___
Conservation Board ____ Planning Board___ Tree Conservancy ___
Economic Development Board____ Public Safety Committee ___ Youth Board ___

Have you attended any meetings of the Boards/Committees listed:______________________________

______________________________________________________________________________________

Occupation: _____________________________________________________________________________

Education: degrees, area of study:______________________________________________________________________________________________

Training: Professional_____________________________________________________________________

Interest or experience_____________________________________________________________________

Community Involvement:____________________________________________________________________

______________________________________________________________________________________

Organizations involved in, member of:________________________________________________________

______________________________________________________________________________________

What can you contribute to the committees/boards to which you have expressed interest in:___________

______________________________________________________________________________________

______________________________________________________________________________________

Please feel free to contact the Town Board to find out more about the committee, the time commitment
involved, and the process.

Thank you for your interest in contributing to our town.

Please complete and mail this form to:
Orchard Park Municipal Center-Supervisor’s Office
4295 South Buffalo St.
Orchard Park, NY 14127

For Committee:
Reviewed:_________
Interviewed:_________
Appointed:_________