

**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 _____ |
| | | Zoning 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: _____