



TOWN OF LITTLETON
Application for Town Board Membership

Name: _____
Please type or print

Residential Address: _____

Mailing Address (if different): _____

Telephone # (____) _____

Work telephone # (____) _____

Email address: _____@_____

Please consider this as my application for [] membership [] reappointment on the following Town Board(s). (Please list order of preference.)

1. _____

2. _____

3. _____

Listed below are the applicant's skills, experience, background, or other factors which would contribute to these committees:

Listed below are other Littleton Town boards/committees on which the applicant currently serves and/or any current employment with the Town of Littleton:

Signature of Applicant Date

TO THE APPLICANT: File completed form in the Board of Selectmen/Town Administrator's office