

**NEW HANOVER COUNTY  
BOARD OF COMMISSIONERS**

230 Government Center Drive, Suite 175  
Wilmington, NC 28403  
Telephone (910) 798-7149  
FAX (910) 798-7145

**NON-COUNTY AGENCY FUNDING  
COMMITTEE APPOINTMENT**



**Board/Committee:** \_\_\_\_\_

**Category (if applicable):** \_\_\_\_\_

**Name:** \_\_\_\_\_ **E-Mail:** \_\_\_\_\_

**Home Address:** \_\_\_\_\_  
(Street) (City) (Zip Code)

**Mailing Address if different:** \_\_\_\_\_  
(Street) (City) (Zip Code)

**Home Phone:** \_\_\_\_\_ **Fax:** \_\_\_\_\_ **Cell:** \_\_\_\_\_ **Business:** \_\_\_\_\_

**Years living in New Hanover County:** \_\_\_\_\_ **Male:** \_\_\_\_\_ **Female:** \_\_\_\_\_ **Race:** \_\_\_\_\_ **Age:** \_\_\_\_\_  
(Information for the purpose of assuring a cross-section of the community)

**Do you have a family member employed by New Hanover County? If yes, name:** \_\_\_\_\_

**Applicant's Employer:** \_\_\_\_\_

*In accordance with Article VI, Sec. 7 of the New Hanover County Personnel Policy, a person currently employed by the agency or department for which this application is made must resign his/her position with New Hanover County upon appointment. Furthermore, the applicant should have no immediate family member employed by such agency or department.*

**Occupation:** \_\_\_\_\_

**Professional Activities:** \_\_\_\_\_

**Volunteer Activities:** \_\_\_\_\_

**Why do you wish to serve on this board/committee?**

*Conflict of Interest: If a board member believes he/she has a conflict or potential conflict of interest on a particular issue, that member should state this belief to the other members of his/her respective board during a public meeting. The member should state the nature of the conflict, detailing that he/she has a separate, private, or monetary interest, either direct or indirect, in the issue under consideration. The member should then excuse himself/herself from voting on the matter.*

**What areas of concern would you like to see addressed by this committee?**

**Qualifications for serving:**

Please list ALL board positions and/or paid employment with non-profit agencies. Please also list other municipal or county boards/committees on which you are serving

**List three local personal references and phone numbers:**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**Date:** \_\_\_\_\_  
Applications are kept on file for 18 months

**Signature** \_\_\_\_\_  
I understand that any board or committee appointee may be removed without cause by a majority of County Commissioners.

Please use reverse side for additional comments