

TOWN OF PATTEN

21 Katahdin Street | PO Box 260 | Patten, ME 04765

Phone 207.528.2215 | Fax 207.528.2055

www.pattenmaine.org

OEESDO Volunteer Application

Date: _____

(Please print clearly)

Full Name _____

Street Address _____

Mailing Address (if different from street address) _____

Occupation _____

Employer _____

Are you a resident of Patten? _____ Yes _____ No

Do you work in Patten? _____ Yes _____ No

Do you own a business in Patten? _____ Yes _____ No

Do you own a home or land in Patten? _____ Yes _____ No

Daytime Phone # _____ Cell Phone # _____

E-Mail Address _____

I wish to be considered for appointment to the: _____
Committee

Do you currently serve (or served in the past) on any Town committee? _____ Yes _____ No

If so, please list the committee(s) _____

List any civic organizations to which you belong:

Town Use Only:

Date form received: _____

Appointed to: _____

Term Ends: _____

Please complete questions on the back of this ~~SSOEBQ~~

1. In the past year, how many meetings have you attended of the committee you are interested in joining?

2. Have you reviewed agendas, minutes and online meetings (if applicable) of the committee?

3. What special skills, talents, and/or unique quality can you offer the committee?

4. Are you aware of the attendance requirements for the committee you are interested in joining?

5. Do you have any conflict of interest that might involve either direct or indirect financial gain or other gain?

6. Please describe why you would be an ideal candidate for this committee.

SIGNATURE: _____

By signing, I certify the above statements to be true and correct. If applicant is under 18, a parent or guardian must also sign.

Thank you for volunteering to serve your community.

Please return form to the Patten Town Office, 21 Katahdin Street, Patten, Maine 04765 or by email to townmanager@pattenmaine.org

Please note that it is the policy of the Town of Patten to conduct background checks on all potential volunteers. Volunteering with any committee is contingent on the results of such checks. Please complete the attached Background Check Consent Form, and return with your application. Not all committees have openings at this time; however, vacancies do occur often. Please check out our website at www.pattenmaine.org for a full listing of all the committees and vacancies.

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Background Check Consent

It is the policy of the Town of Patten to conduct background checks on all potential volunteers. Volunteering with any committee is contingent upon the results of such checks. In order to conduct the background check, your date of birth is required. Please provide us with your date of birth date, signature, and return this form to the Town Office with your Volunteer Application.

Full Name: _____ Date of Birth: _____

Other Names Used (including maiden name): _____

I understand that the above information, which I have voluntarily provided, will be used solely for the purpose of a background check. It will not be used for any other reason until such time as I become a volunteer with the Town of Patten.

Signature: _____ Date: _____