

**Town of Oakham**  
**General Bylaw Review Committee**

\_\_\_\_\_  
(Date)

BOARD OF SELECTMEN  
2 Coldbrook Rd., Unit 1  
Oakham, MA 01068

TEL. NUMBER (508) 882-5549 X300  
FAX NUMBER (508) 882-3060  
E-MAIL: admin@oakham-ma.gov

My name is \_\_\_\_\_, and I am interested in serving on the above-named board.

Following is a brief resume of my background and experience:

Address: \_\_\_\_\_ Tel. Number \_\_\_\_\_  
Bus.Tel.Number \_\_\_\_\_ Fax Number \_\_\_\_\_

Years lived in Oakham: \_\_\_\_\_ E-Mail Address \_\_\_\_\_

Municipal Service:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Educational Background:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Employment experience:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Other:  
\_\_\_\_\_  
\_\_\_\_\_

I wish to serve because :  
\_\_\_\_\_  
\_\_\_\_\_

Time availability (days, evenings, weekends):  
\_\_\_\_\_  
\_\_\_\_\_

Do you or any member of your family have any business dealings with the Town? If so, please explain:  
\_\_\_\_\_  
\_\_\_\_\_