

Town of Oakham

APPLICATION FOR APPOINTMENT TO

(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 am interested 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:

