CITIZENS OF CUMBERLAND COUNTY

If you are a Cumberland County citizen interested in serving as a member of one of the County's Advisory Boards, please ENTIRELY complete the form below and mail to the Office of the County Commissioners, P.O. Box 1829, Fayetteville, NC 28302-1829, or fax to 678-7770. YOU MUST BE A RESIDENT OF CUMBERLAND COUNTY TO APPLY. Some of these boards/commissions meet during the day. Please check the meeting schedule of the particular board you wish to apply to before submitting an application. Information and a listing of upcoming vacancies on the boards/commissions listed below can be found on the County's web page at co.cumberland.nc.us, or you may call 678-7772.

Application for 2007 Boards/Commissions Appointment

ABC Board Adult Care Home Community Advisory Committee Air Quality Stakeholders Committee Board of Adjustment **Civic Center Commission** Community Child Protection/Fatality Prevention Team **Cumberland Cemetery Commission** FTCC Board of Trustees Human Relations Commission Industrial Financing Authority Joint Appearance Commission Joint Planning Board Joint Senior Citizens Advisory Board Jury Commission Library Board of Trustees Mid-Carolina Aging Advisory Committee Minimum Housing Appeals Board Nursing Home Advisory Board Recreation Advisory Board Social Services Board Southeastern Economic Development Commission Storm Water Advisory Board Wrecker Review Board

The following boards have specific categories of membership: Animal Control Board Board of Health Cape Fear Valley Health System Board of Trustees Child Homicide Identification & Prevention Council Criminal Justice Partnership Advisory Bd. **Emergency Planning Committee** Equalization and Review Board Farmland Advisory Committee Fayetteville Area Convention & Visitors Bureau Board & Occupancy Tax Advisory Committee Home & Community Care Block Grant Committee Juvenile Crime Prevention Council Mental Health Board Tourism Development Authority Transportation Advisory Board Workforce Development Board (business representatives)

**** PLEASE PRINT OR TYPE ****

NAME	DATE	
ADDRESS	CITY/STATE	ZIP
TELEPHONE: Home	Work	
OCCUPATION		
PLACE OF EMPLOYMENT		
EDUCATIONAL BACKGROUND		
Board/Commission Interested In:		
1	2	
3	4.	

government agency?_____ If so, please give the following information: Position: ______ Organization: _____ Date Term Ends: _____ Are you a graduate of a leadership program? Please name: _____ Date Term Ends: _____ When openings occur, your application will be considered along with others received.