

Application for Public Participation ConsiderationBorough of Greencastle

60 N. Washington Street Greencastle, PA 17225 PHONE: 717-597-7143 FAX: 717-597-1022 office@greencastlepa.gov

Applicant Information		
Name:	Date:	
Telephone:	Email:	
Address:		
City:	State:	Zip:
Areas of Interest		
For which Board, Commission or Committee would you lil 1st choice: 2nd choice: 3rd choice:		
Please list any education, prior volunteer experience, work related experience, or other civic involvement which could be of use to the volunteer position in which you are applying for (attach resume if necessary).		
Please provide a brief statement of 50 words or less expressing why you have an interest in serving on the Board, Commission or Committee for which you are applying (attach additional sheets as needed).		
How much time do you anticipate you can commit to this position? (Please check one option.) 1) Two evenings a month, plus a few hours or more at your choosing 2) One evening a month, plus a few hours of your choosing 3) One evening every 2-3 months, plus a few hours of your choosing		
Please indicate any conflicts of interest, if any, that you may have if chosen for the identified position.		
Applicant Signature	Date	

Rev: 12-10-21