# **VACANCY APPLICATION FORM**

#### TOWN OF MILTON BOARDS, COMMISSIONS, COMMITTEES & OFFICERS

Pursuant to the Milton Town Charter, applicants' names for board, commission, committee, and officer positions listed in §306 are subject to disclosure in the Selectboard Minutes. The Selectboard retains the option of conducting the interview in Open Meeting or in Executive Session. Disclaimer: the content of this application may be considered public record and may be subject to disclosure under State and Federal law. This application only applies to positions covered by the Town's Vacancy Policy. Submit your complete application to the

Town Manager's Office at 43 Bombardier Rd. Milton, VT 05468 (M-F 8 a.m. to 5 p.m.) or by e-mail to ajanda@town.milton.vt.us

Full Legal Name:	Preferred First Name:
Position Sought:	
Legal Address:	
Mailing Address:	
Telephone Number(s):	
E-mail:	
Are you a registered voter in the Town of Milton?*  *Applicants for the offices of Zoning Administrator, Health Officer, To are not required to be legally registered voters in the Town of Milton.	
To complete your application, you must submit the Criminal application as well as the Supplemental Information form (or • Any prior municipal or public service; • Your motivations; and • Any beneficial qualifications.	
CONFLICTS OF INTEREST & ETHICS ACKNOWLEGEMENT By initialing here you acknowledge that you have read and uninterests & ethics that are attached to this application.	
CONDUCT ACKNOWLEDGEMENT  By initialing here you acknowledge that you have read and ur  Committees, Commissions and Boards attached to this application.	derstood the Town's Guidelines and Ground Rules for
ACCURACY ACKNOWLEDGEMENT By signing here you acknowledge: All information provided is accurat understand the Selectboard has the authority to remove members appoin <i>Charter</i> , <i>Administrative Code</i> and Vermont State Statute, as applicable application.	nted by them in accordance with the Milton Town
Signature:	Date:
OFFICE USE ONLY	
Applicant has been notified by (staff name) via attend the Selectboard meeting on (date). Applicant of sought (requires/does not require) that the applicant by (staff) on (date). If incumbent, last	confirmed on(date). The position being be a legal voter of Milton. Voter registration verified

# **SUPPLEMENTAL INFORMATION**

(You may use this page or enclose your own cover letter covering the topics below.)

Prior Municipal or Public Service:  If applicable, please list and prior municipal or public service experience you have had.	
Motivations for Service Please explain why you would like to serve your community.	
<b>Beneficial Qualifications</b> :  Please list any qualifications you have that would be a benefit to the position sought.	

### **CRIMINAL BACKGROUND FORM**

Full Legal Name:		
Previous Names or Aliases:		
Date of Birth:		
CRIMINAL CONVICTIONS RECORDS HISTORY AND By signing here you understand that a Criminal Convictions Authorized Agent from the Vermont Criminal Information (	s Records History will be obtained by the Town of Milton's Duly	
Signature:	Date:	
Do you have any Criminal Background? ☐ YES	□NO	

**Explanation of Criminal Background** *If yes, please list the details of any criminal offenses, violations, charges, or convictions (other than minor traffic* violations), including where and when the offense(s) occurred.