

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) or by e-mail to mthompson@town.milton.vt.us**

Full Legal Name: _____ Preferred First Name: _____

Position Sought: _____ Term: _____

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, Town Attorney, Pound Keeper and Planning Director are not required to be legally registered voters in the Town of Milton.

To complete your application, you must submit the **Criminal Background Information** form attached to this application as well as the **Supplemental Information** form (or a cover letter) which includes the following:

- Any prior municipal or public service;
- Your motivations; and
- Any beneficial qualifications.

CONFLICTS OF INTEREST & ETHICS ACKNOWLEDGEMENT

By initialing here _____ you acknowledge that you have read and understood the *Town Charter's* provisions on conflicts of interests & ethics that are attached to this application.

CONDUCT ACKNOWLEDGEMENT

By initialing here _____ you acknowledge that you have read and understood the Town's *Guidelines and Ground Rules for Committees, Commissions and Boards* attached to this application.

ACCURACY ACKNOWLEDGEMENT

By signing here you acknowledge: All information provided is accurate and complete to the best of your ability; and, you understand the Selectboard has the authority to remove members appointed by them in accordance with the *Milton Town Charter, Administrative Code* and Vermont State Statute, as applicable, for misrepresentation of any statement made on this application.

Signature: _____ Date: _____

OFFICE USE ONLY

Applicant has been notified by _____ (staff name) via _____ (phone/e-mail) on _____ (date) to attend the Selectboard meeting on _____ (date). Applicant confirmed on _____ (date). The position being sought _____ (requires/does not require) that the applicant be a legal voter of Milton. Voter registration verified by _____ (staff) on _____ (date). If incumbent, last year's attendance record is _____.

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.

Beneficial Qualifications:

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 AUTHORIZATION

By signing here you understand that a Criminal Convictions Records History will be obtained by the Town of Milton's Duly Authorized Agent from the Vermont Criminal Information Center, as permitted by law.

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.