

# 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 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 listed below can be found on the County's web page at [co.cumberland.nc.us](http://co.cumberland.nc.us), or you may call 678-7772.

## Application for Cumberland County Boards 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 \_\_\_\_\_ RACE/SEX \_\_\_\_\_

EDUCATIONAL BACKGROUND \_\_\_\_\_

Board/Commission Interested In:

1. \_\_\_\_\_ 2. \_\_\_\_\_  
3. \_\_\_\_\_ 4. \_\_\_\_\_

Are you currently serving in one or more appointed or elected positions in any Federal, State or local government agency? \_\_\_\_\_ If so, please give the following information: Position: \_\_\_\_\_, Organization: \_\_\_\_\_ Date Term Ends: \_\_\_\_\_

Are you a graduate of a leadership program? Please name: \_\_\_\_\_

When openings occur, your application will be considered along with others received.