

**Boards & Committees Application Instructions:**

- Check the appropriate Committee or Board for which you would like to be considered.
- All applications must be complete.
- Please fill out, print, and sign the Background Check Authorization form.
- Once the application and authorization are complete, you can return the forms to the Town Clerk's office, or you can scan and email them to: [clerk@lisbonme.org](mailto:clerk@lisbonme.org)

***Thank you for your willingness to Volunteer with Lisbon!***



# TOWN OF LISBON

300 Lisbon Street  
 Lisbon, Maine, 04250  
 lisbonme.org • 207-353-3000

## APPLICATION FOR APPOINTMENT TO BOARD OR COMMITTEE

*Please Check One:*

- |  |   |
|--|---|
| <input type="checkbox"/> Appeals Board           | <input type="checkbox"/> Lisbon Development Committee |
| <input type="checkbox"/> Planning Board          | <input type="checkbox"/> Library Governing Board      |
| <input type="checkbox"/> Conservation Commission | <input type="checkbox"/> Assessment Review Board      |
| <input type="checkbox"/> Recreation Committee    | <input type="checkbox"/> Cemetery Committee           |
| <input type="checkbox"/> Ethics Panel            | <input type="checkbox"/> Other _____                  |

Name:	Application Date:
Street Address:	
Mailing Address (if different):	
Email Address:	
Home Phone:	Cell Phone:
Occupation:	Employer:
How long have you lived in Lisbon?	
Have you attended any of the meetings of this board or committee?	
Are you interested in other committees? If so, please list in priority order.	
Please list any contributions or improvements you feel you can make to the committee:	



# Background Investigation Authorization Form

We are an Equal Opportunity Employer

I, \_\_\_\_\_, understand and agree that, as a condition of employment, and in order to assess my qualifications for the position of \_\_\_\_\_, a full investigation of my background is necessary, including verification of all information submitted on my application for employment.

### I have read, understand and agree to the following:

I hereby authorize the Town of Lisbon or a third party acting on its behalf, to conduct a thorough inquiry into all areas deemed necessary to assess my qualifications for employment. I understand and agree that the Town of Lisbon may contact or contract with private information centers, consumer reporting agencies, government agencies, mutual associations, educational institutions, former employers and other third parties to assess my qualifications and verify information that I provide is accurate in every way. This may include, but is not limited to: verification of my employment, educational, and personal history; verification of information provided on my application or resume; contact with current and former employers, clients, business associates, professional organizations or other institutions regarding work performance and character; inquiry into my credit history, driving record, and criminal history as well as all public record information relating to my application for employment.

I hereby specifically release from liability and authorize employers, local, state, and federal administrators, credit bureaus, institutions, mutual associations, consumer reporting agencies or any persons to freely and completely respond to any inquiry made by or on behalf of the Town of Lisbon.

*A copy of this document shall be, for all intents and purposes, as valid as the original.*

Applicant Legal Name: Last: \_\_\_\_\_ First: \_\_\_\_\_ Middle: \_\_\_\_\_

Other Names Used: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Drivers License Number: \_\_\_\_\_ Issuing State: \_\_\_\_\_

Legal Address: \_\_\_\_\_

City \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

I hereby authorize the background investigation discussed herein and I affirm that all answers given to the Town of Lisbon are true and complete. I understand that my employment may be ended at any time if it is discovered that I withheld or falsified any information during the hiring process.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Please print this form and sign for legal purposes. Once signed, a scanned copy may be submitted.*