

APPLICATION

LINCOLN COUNTY BOARDS OR COMMITTEES

Return to: Lincoln County Commission  
PO Box 497  
Hamlin, WV 25523

Applicants are considered for all positions without regard to race, color, religion, sex, national origin, age marital or veteran status, or the presence of disability if otherwise qualified for the position.

Date of Application \_\_\_\_\_

Name \_\_\_\_\_

Street \_\_\_\_\_

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

Home Phone \_\_\_\_\_ Business Phone \_\_\_\_\_

Social Security Number \_\_\_\_\_

Which Board, Commission or Committee? \_\_\_\_\_

Are you now employed \_\_\_\_\_ yes \_\_\_\_\_ no

Name of employer \_\_\_\_\_

On what date would you be available to serve \_\_\_\_\_

Have you been convicted of a felony or misdemeanor, excluding traffic violations

\_\_\_\_\_ yes \_\_\_\_\_ no If yes, please explain and list

\_\_\_\_\_

\_\_\_\_\_

Veteran of the U.S. Military Service \_\_\_\_\_ yes \_\_\_\_\_ no

If yes, Branch \_\_\_\_\_

Give name, address and telephone number of three references who are not related to you and are not previous employers.

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**Education**

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**Employment Experience**

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List any Committees or Boards you are now or have previously served on

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**AGREEMENT**

I certify that the answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE