

TOWN OF TRURO

P.O. Box 2030, Truro MA 02666

Tel: (508) 349-7004 Fax: (508) 349-5505

APPLICATION TO SERVE ON THE WALSH PROPERTY COMMUNITY PLANNING COMMITTEE (WPCPC)

NAME:		HOME TELEPHONE:		
ADDRESS:	WORK PHONE :			
MAILING A	ADDRESS:	E-MAIL:		
FAX:				
	ne following demographics and pe ic characteristics, but no more that			
Please rank in	tradesperson youth student young family senior resident local business owner	fordable housing oppo on and open space nee nment, habitat, and eco opportunities	eleast concerned about) ortunities	
as necessary	:	_	elete your responses on additional sheets	
above:				

Please explain your ability to engage in respectful and constructive dialogue with other participants, maintain an open mind, and seek creative options that respond to the interests of other participants as well as your own:

Please explain your contribution to the div	versity of experience, knowledge, expertise, geography, and demographic
	eetings, thoughtfully listen to public and constituent perspectives, and
Any Other Special Qualifications or Inte	erests:
Comments:	
SIGNATURE:	DATE:
***********	**************************************
SIGNATURE:	DATE:
INTERVIEW DATE:	APPOINTMENT DATE (IF APPLICABLE):