

**SALISBURY TOWNSHIP  
2900 S. PIKE AVENUE  
ALLENTOWN, PA 18103  
610-797-4000**

**Application for committees/boards**

Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Home Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Fax No. \_\_\_\_\_ Business Phone: \_\_\_\_\_ E-mail address: \_\_\_\_\_

Business: \_\_\_\_\_

Board or Committee Applied for: \_\_\_\_\_

Are you a registered elector at the time of this application? Yes \_\_\_\_\_ No \_\_\_\_\_ Ward \_\_\_\_\_

Have you been a resident of the Township continuously and resided at least one (1) year from the date of this application?

Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever been convicted of or pled guilty or no contest to a felony? \_\_\_\_\_

Do you currently hold public office? Yes \_\_\_\_\_ No \_\_\_\_\_

If so, what is that office? \_\_\_\_\_

Do you now serve, or have you ever served, on a board or committee? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please list the committees/boards: \_\_\_\_\_

Please list your community activities (civic clubs, neighborhood associations, etc.) and positions held:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Education: \_\_\_\_\_

Experience: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The undersigned hereby affirms that all foregoing answers to the within questions are true and correct.

\_\_\_\_\_ (Applicant's Signature) \_\_\_\_\_ (Date)

*Please attach any additional information/resume you feel pertinent. This application should be sent as follows: Attn: Board of Commissioners, c/o Cathy Bonaskiewich, Township Manager, 2900 S. Pike Avenue, Allentown, PA 18103, fax 610-797-5516, or e-mail [info@salisburytownship.org](mailto:info@salisburytownship.org). Thank you for volunteering to serve the citizens of Salisbury Township.*