

## APPLICATION FOR APPOINTMENT TO SERVE AS A COMMISSIONER ON THE NORTH CAROLINA EASTERN MUNICIPAL POWER AGENCY

The undersigned is interested in community service and provides this information for use by the Board of Aldermen in considering their qualifications for appointment .

Appointment for which you are applying:

Name

O North Carolina Eastern Municipal Power Agency

| Physical Address:  |                     |
|--|---------------------|
|  |                     |
|  | For How Many Years? |
| State and County of Legal Residence:   |                     |
| Main Phone Number  | Secondary Number    |
| Email Address:   |                     |
| You may submit a resume along with your application detailing the following section if you choose. |                     |
| Education  |                     |
|  |                     |
| Past/Most Recent Employer  |                     |
| Current Civic/community Participation  |                     |
| Reasons you are qualified for this appointment (optional)  |                     |
|  |                     |
|  |                     |
| Do you anticipate any conflicts of interest if appointed?  Ves No                                  |                     |
|  |                     |
| Signature  | Date                |
|  |                     |

Please Return to: Deputy City Clerk Tanya Shannon tshannon@cityofsouthport.com: 1029 N. Howe Street, Southport, NC 28461