



**TOWN OF UXBRIDGE
BOARD OF SELECTMEN
Town Hall Room 102
21 South Main Street
Uxbridge, MA 01569-1851
508-278-8600 Fax 508-278-8605**

TALENT BANK FORM

Local Government needs citizens to give of their time and talents serving the Town of Uxbridge. This Talent Bank Form has been established to compile a list of interested citizens who are voluntarily willing to serve on Boards, commissions, and committees. Some groups meet often, others require less time, and still others are busy only at specific times of the year. Occasionally, there are requirements for ad hoc committees or sub-committees who are appointed to work on special projects.

If you are interested in serving, please check your preference(s) below and return the completed form to the Town Manager at the address listed above. The form can also be faxed or emailed.

- | | |
|---|---|
| <input type="checkbox"/> ADA Committee | <input type="checkbox"/> Affordable Housing Committee |
| <input type="checkbox"/> Blanchard Reuse Committee | <input type="checkbox"/> Board of Health |
| <input type="checkbox"/> Board of Registrars | <input type="checkbox"/> Bylaw Review Committee |
| <input type="checkbox"/> Compensation Advisory Board | <input type="checkbox"/> Conservation Commission |
| <input type="checkbox"/> Council on Aging | <input type="checkbox"/> Cultural Council |
| <input type="checkbox"/> Historic Cemetery Committee | <input type="checkbox"/> Historic Commission |
| <input type="checkbox"/> Historic District Commission | <input type="checkbox"/> Housing Authority |
| <input type="checkbox"/> Industrial Development Committee | <input type="checkbox"/> Land Planning Committee |
| <input type="checkbox"/> Parade Committee | <input type="checkbox"/> Planning Board |
| <input type="checkbox"/> Poll Worker | <input type="checkbox"/> Recreation Commission |
| <input type="checkbox"/> Scholarship Committee | <input type="checkbox"/> School Building Committee |
| <input type="checkbox"/> Town Common Committee | <input type="checkbox"/> Website Committee |
| <input type="checkbox"/> Zoning Board of Appeals | <input type="checkbox"/> Other: _____ |

NAME: _____ Are you a registered voter? _____

ADDRESS: _____

HOME PHONE: _____ WORK PHONE: _____ FAX: _____

EMAIL ADDRESS: _____ OCCUPATION: _____

PLEASE LIST ANY POTENTIAL CONFLICTS OF INTEREST (CURRENT MEMBERSHIPS, BUSINESS AFFILIATION):

SPECIAL INTERESTS AND SKILLS: _____

EDUCATION AND EXPERIENCE: _____

REASONS FOR WANTING TO SERVE: _____