



APPLICATION FOR NOMINATION Greensboro Historic Preservation Commission

Name: _____ Email _____

Home Address _____ City, Zip _____

Phone: Day _____ Evening _____ Fax _____

I am: (Check all that apply)

- A Resident of the _____ City of Greensboro or of _____ Greene County
- Available for Board meetings at 4 pm on the third Monday of each month
- An Elected Member of Government: Elected Position _____
- A Greensboro Property Owner: Property Address _____
- A Greensboro Business Owner: Business Name _____
- A Greensboro Employee: Business & Position _____

My community involvement over the past two years includes: (Check all that apply)

- Serving on Committee(s) _____
- Assisting with Projects _____
- Participation in Events _____

Organizations to which I belong and volunteer service include: _____

Interest/Hobbies/Talents/Skills: _____

I am interested in serving on the Greensboro Historic Preservation Commission because:

I will allow my name to be submitted for consideration in service to the Authority; and if appointed to serve as a member of the Board of Directors, I agree to:

- Attend all possible regular monthly Board meetings, committee meetings and any special meetings with no more than three absences in one calendar year
- Attend eight hours of training within my first year of service as required by law
- Enter into full discussion and participation in policy decisions affecting the Greensboro Historic Preservation Commission and its purpose
- Accept responsibility for assignments and offer suggestions on programming or operations
- Maintain matters of confidence
- Serve the Commission, working for its overall well being and that of the historic business district
- Seek opportunities to learn more about historic preservation efforts and best practices

Signature _____ Date _____

Return to: City of Greensboro, Main Street Program, PO Box 741, Greensboro, GA 30642, 706-453-7674