



**TOWN OF BENNINGTON  
CHARTER COMMITTEE  
APPLICATION**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

email: \_\_\_\_\_

1. Please tell us why you wish to serve on the Charter Review Committee?

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

2. Have you given any thought to areas of the Charter that you would like the committee to focus on?

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

3. Can you keep an open mind and listen to others regarding any aspect of the Charter?

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

4. Can you give enough of your time so the committee can provide appropriate deliberation and make its recommendations to the Select Board within six months from appointment?

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

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date