



Town of Smithfield

Camp Shepard Sub-Committee Application

Name:	Home Phone:
Address:	Cell Phone:
	Email:
Are you a registered voter in the Town of Smithfield? [] Yes [] No	
Please provide information relating to your professional background.	
Current Employer:	Occupation:
Address:	Phone:
PLEASE PROVIDE A RESPONSE TO THE FOLLOWING QUESTIONS:	
1. Why do you want to join the Camp Shepard Sub-Committee?	
2. How do you see yourself contributing to the sub-committee?	
3. What experience do you have with recreation, conservation, programming or land use planning?	
4. What is your ideal vision for the Camp Shepard Property?	

5. What life experience, education, skills or abilities do you have that make you a good fit for this sub-committee?

Are there any days or times of day that you would be unable to attend meetings?
If yes, please explain:

Yes No

(Signature of Applicant)

(Date)

Please Return to: Town of Smithfield
Randy R. Rossi, Town Manager
64 Farnum Pike
Smithfield, RI 02917

Phone: (401) 233-1010
Fax: (401) 233-1080

e-mail rrossi@smithfieldri.com