



**Mathews County, Virginia**  
**Application to County Boards, Committees and Commissions**

**Personal Information:** *(Please complete this information. Incomplete applications will not be considered.)*

Name: \_\_\_\_\_  
                     (Last)  (First)  (DATE)

Physical Address: \_\_\_\_\_  
 \_\_\_\_\_ Zip Code: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
 \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Telephone: (     ) \_\_\_\_\_ Other Telephone (     ) \_\_\_\_\_

E-mail address \_\_\_\_\_

Are you a permanent, year-round resident of Mathews County?     \_\_\_ Yes \_\_\_ No

Are you a registered voter in Mathews County?                       \_\_\_ Yes \_\_\_ No

Do you own real estate in Mathews County?                             \_\_\_ Yes \_\_\_ No

*(State law requires certain board and commission members to be real estate owners in the community)*

**Description of Qualifications/Skills**

*(Provide a brief description of why you are interested in the board or commission for which you are applying; you may include a statement as to what skills, education, knowledge, etc. you feel may contribute to the board or commission's work.)*

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(Please see page 2 to choose from a complete listing of Mathews County Boards and Commissions.)

Please check the following boards or commissions in which you are interested in being considered for appointment.

**Mathews County Boards and Commissions:**

<b>Boards and Commissions:</b>	<b>Members</b>	<b>Term (Years)</b>	<b>Term Limit</b>
_____ Board of Building Appeals	5	5	
_____ Board of Zoning Appeals	5	5	
_____ Economic Development Authority	5-7	4	
_____ Library Board	6	4	2
_____ Planning Commission	7	4	
_____ Social Services Board	4	4	2
_____ Wetlands Zoning Board	7	5	
_____ Board of Equalization	5	1	2

**Regional Boards and Commissions:**

<b>Boards and Commissions:</b>	<b>Members</b>	<b>Term (Years)</b>	<b>Term Limit</b>
_____ Bay Consortium Workforce Investment Board	2	4	
_____ Agency on Aging, Inc.	2	5	2
_____ MP-NN Community Services Board	1	3	3
_____ MP Planning District Commission	1	1	
_____ Rappahannock Community College	2	4	2
_____ Tidewater Soil and Water Conservation District	1	4	

**Signature of Applicant** \_\_\_\_\_ **Date** \_\_\_\_\_

**Submit the completed application to:**

Mathews County Administration Office  
 50 Brickbat Road, Suite 202  
 P.O. Box 839  
 Mathews, VA 23109  
 Phone: (804) 725-7172  
 Fax: (804) 725-7805

<b>For Internal Office Use Only:</b>	
Date Appointed _____/_____/_____	Term Expires _____/_____/_____
Date Appointed _____/_____/_____	Term Expires _____/_____/_____
<b>Notes:</b>	