CITY OF DOVER, NEW HAMPSHIRE

BOARDS, COMMISSIONS, COMMITTEE <u>APPLICATION</u>

NAME: White	ney Carrier	_telephone: <u>40</u>	15) 818-lele	<u></u> 82
E-mail Address: W. Carrier @ Saull. urg				
RESIDENCE ADDRESS: Let Toffree Ln. Dover, NH				
MAILING ADDRES	S (if different)			-
RESIDENT OF DOV	VER FOR 10	_YEARS	ward 3	-
I AM INTERESTED Committee (s)	Equity 4	HE FOLLOWING BOA	rd, Commission or	
MY BACKGROUND OR INTERESTS ARE: 1 am an Educator in the district and an Adult Ally for Project				
		school I am		
): Work to in		
better Dove	on across	the city to	o provide oc commu	ahity
better Dover for all of our BIPOC community Thave served on the following committee(s) in the past: na				
1 am cur Committee	rently on to	he Equity hool distric	Vision Ke	zepers -
DO YOU FEEL THAT YOU CAN GIVE ENOUGH OF YOUR TIME AND EFFORTS TO SERVE THE CITY OF DOVER?				
ME	SIGNATURE	4/4/2	3	_
	SIGNATUR	L - DAIL		

Upon completion of this form, please return to the City Clerk's Office. Committee Application form is kept on file for a period of <u>one year</u> from date of submission.