



TOWN OF SMITHFIELD
Office of the Town Manager

Reapplication Form
*Boards, Committees, Commissions
and Appointed Positions*

To which board are you reapplying?

Are you interested in any other boards? If so, which ones?

Please provide the following personal information. Please Print. **Restrictions:** If you prefer not to be contacted at specific locations or times, please specify.

Name:

Home Phone:

Address:

Cell Phone:

E-Mail and/or FAX:

Specify Restrictions:

Please provide information relating to your professional background.

Current Employer:

Occupation:

Address:

Phone:

Comments:

(Signature of Applicant)

(Date)

Please Return to: Town of Smithfield
Dennis Finlay, Town Manager
64 Farnum Pike
Smithfield, RI 02917

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FAX: (401) 233-1080
e-mail: dfinlay@smithfieldri.com