

**EXHIBIT B**

**APPOINTMENT APPLICATION**

**Harrison Township Authorities, Boards, Commissions, and Advisory Committees**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ Harrison Township, PA 15065

PHONE: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

POSITION(S) FOR WHICH YOU ARE APPLYING:

\_\_\_\_\_

QUALIFICATIONS/EXPERIENCE (Please attach a resume or any additional information):

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

PLEASE EXPLAIN WHY YOU ARE INTERESTED IN SERVING IN THIS POSITION:

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

If you are a member of any other Harrison Township Authority, Board, Commission, or Advisory Committee, please state why you desire to serve on another body:

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

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

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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Send application to [smotosicky@harrisontwp-pa.gov](mailto:smotosicky@harrisontwp-pa.gov) or PO Box 376, Natrona Heights, PA 15065

Date Received by Township: \_\_\_\_\_

Received by: \_\_\_\_\_