## NORTH CAROLINA ASSOCIATION OF MUNICIPAL CLERKS

## WE SHARE OUR SERVICES MENTEE APPLICATION

Name		Position			
Address Cit		ity/Town			
Zip	Code	Email			
-		opulation			
]	Phone Phone Phone	ориганоп			
1.	Are you a member of the NCAMC?	Yes		How Long?	No
2.	What form of government is your city/town?				
3.	How long have you been in your current position	?			
4.	Are you willing to work with a mentor via email?	Yes	No		
5.	Are you willing to make contact with your mento in person?	Yes	No		
6.	Have you ever had a mentor before?	Yes	No		
	If yes, briefly describe your experience:				
Stre	ngths: (please check all areas in which you feel you	ı could ben	efit fron	n guidance)	
	Annexation/Zoning Agenda				Grants
	Code/Codification Election				Finance
Council Relations Econom		omic Devel	lopment		Licensing
Ordinances/Resolutions Record		ords Manage	ement		Audit
	Newsletters Public		Utilities		Computer/Software
	Website Hum	an Resource	es		Emergency Mgmt.
	Other:				
Inclu	ude any other comments you have here:				
	Please email your completed application to:	shannan.pa	arrish@s	mithfield-nc.co	om
	OR, print and mail your completed application to:	Shannan L. Town of Sn PO Box 76	nithfield	Γown Clerk	

Smithfield, NC 27577