

Warren County Boards/Committees/Commissions Orientation



___ 1st time appointment

___ Re-appointed

Date signed: _____, 20__

I _____, active member of the following Board/
(Members name printed)

Committee/Commission/Council _____
have received, read and understand the following articles which review is required for participation in any Warren County Board/Committee/Commission/Council.

Initial each:

___ Open Meetings: Questions & Answers
(You may contact Warren County Attorney for explanation at 252-257-3115)

___ Warren County's Policy for Board & Committee Appointments and/or ReAppointments and Board and Committee Activities
(You may contact Warren County Attorney and/or Clerk to the Board of Commissioners for explanations)

___ County of Warren Volunteer Policy
(You may contact Warren County Attorney and/or Clerk to the Board for explanations)

___ Warren County Board-Commission-Committee-Council Maintenance
(You may contact Warren County Clerk to the Board of Commissioners for explanations)

Your Signature _____

Retain a copy for your file and return one copy of this form to County Administration
Office at: 602 W Ridgeway Street, PO Box 619, Warrenton, NC 27589)
Office # (252) 257-3115 Fax # (252) 257-5971