Abbeville County
903 W. Greenwood St., Suite 2800
Abbeville, SC 29620

NOMINATION APPLICATION
BOARDS, COMMISSIONS AND COMMITTEES

Board to which you wish to be considered for appointment_____

Name: _____
Last First Middle

Home Address: _____Home Telephone: _____

_____Home Fax: _____

_____

County Resident: Yes_____No_____ Council District_____

Present Employer: _____Title/Position: _____

Address: _____Office Telephone: _____

_____Office Fax: _____

_____

Please indicate which best describes the level of education you last completed.

Some High School_____High School Graduate or GED_____Some College_____
College Graduate_____Professional Degree (Please specify) _____

Do you have any interest in any business that has, is, or will do business with the County of Abbeville or the entity for which you have been nominated?_____If so, please list.

Do you serve on any local or state board or commission or committee or elected office? _____

Applicant's Signature: _____Date:_____

Councilmen's Signature:_____Date:_____