

OFFICE OF THE  
**BOARD OF SELECTMEN**  
**TOWN OF MAYNARD**  
MUNICIPAL BUILDING  
195 MAIN STREET  
MAYNARD, MASSACHUSETTS 01754  
Tel: 978-897-1301 Fax: 978-897-8457

**Appointee Interview Questionnaire**

Name:

Address:

Phone Number:

Email Address:

Committee/Board/Commission applying for:

What's your interest in joining this group?

What's your understanding of the role of this group?

Have you attended meetings of this group?

How might you help the group to be successful if appointed?

What about your background/experiences may be valuable to the group in its success?

What is your understanding of the groups priorities for the coming year?

Have you reviewed the town's guiding documents planning materials, including its Town Charter, By-Laws, Board of Selectmen annual goals, Master Plan, Open Space and Recreation Plan, Community Development Principles, and Financial Policies Manual?

*Applicable group's charge should be attached/linked to questionnaire.*