## **Snodland Town Council – Co-option of a Councillor Application Form**

## **Applicant Details**

Name	
Commonly used name	
Address including postcode	
Telephone	
Email	
Date of Birth	
Please state any qualifications or special expertise that you believe will be helpful to you as a Councillor.	
Briefly outline why you wish to become a Councillor	

I wish to apply to be considered for the vacancy on Snodland Town Council

Signature Date

Information submitted to the Council on this form will be regarded as confidential