



GREAT NEWS!

The residents of Bolton have received a grant of \$100,000 from the Hartford Foundation for Public Giving to be spent as we see fit. That's right, \$100,000!

What's the catch?

No catch, but Bolton needs to select an Advisory Committee, which is inclusive and reflective of all town residents, to decide how to use the money.

To be eligible to serve on the Advisory Committee:

- You are a Bolton resident
- You aren't an elected official
- You are at least 14 years old

So, step up. Fill out the application and tell us, the Selection Committee, why YOU should be on the Advisory Committee.

Send your application by **Friday**, **July 31** to **BoltonGives@gmail.com** or by mail to BoltonGives, 25 Hanover Farms Road, Bolton CT 06043. Email us with any questions.

You can also find the application online at hfpg.org/boltoncf.

Qualified applicants will be contacted for an interview.

With gratitude,

Bolton Gives Community Fund Selection Committee

Bev Alleman, Ron Alleman, Trish Brudz, Eileen Dulen-Jennings, Jon Weaver





BOLTON GIVES COMMUNITY FUND ADVISORY COMMITTEE APPLICATION

Full Name:	
Phone Number:	Email Address:
Best times to reach you:	Address:
Have you ever been a member of any local organizations? If so, which one(s).	
What do you see as the strengths and needs of our community?	
Please describe why you are interested in participating in the Bolton Community Fund Advisory Committee?	
In hopes of creating a committee that is inclusive and reflective of all Bolton residents, please tell us something about yourself and what perspectives you would bring to the committee. (You may want to include things such as work experience, family, educational background, age, religion, ethnicity, etc.)	
Applicants under 18 need permission from a parent or guardian to apply.	
I give permission for my child to apply to be a member of the Bolton Gives Community Fund Advisory Committee, and if accepted, to participate in all meetings/activities of the same. I understand the Community Fund may wish to make known the success of this effort, and I authorize my child to appear in photographs for this purpose.	
Parent/Guardian Signature:	Date:

Application does not ensure acceptance on Advisory Committee.