## **Application Form**

Profile				
Mechelle	С	Barber		
First Name	Middle Initial	Last Name		
mechelle.barber@gmail.cor	n			
Email Address				
20 Quakertown Meadows				
Home Address			Suite or Apt	
Ledyard			СТ	06339
City			State	Postal Code
Mobile: (860) 705-3095				
Primary Phone	Alternate Ph	none		
Which Boards would yo	u like to ap	oply for?		
Ledyard Beautification Com	mittee: Subm	nitted		
Education & Experience	ces			
Please tell us about yourse	elf and why	you want to ser	ve.	
Why are you interested	l in serving	on a board or	commission?	
I would like to help be part olocals.	of making Le	dyard look nice a	nd being part of a	new group with
Community Involvemen	it			
Volunteer as a Faith Format gardens at Our Lady of Loui				ng maintain
Educational Backgroun	d			
UCONN 2007 (BSN) ROBERT	E FITCH HIG	SH SCHOOL 2002		
Lawrence Memorial Hospita		N		
Employer	Job Title			
Upload a Resume				

Submit Date: Oct 07, 2025

## **Party Affiliation**

□ Democrat

## **Disclaimer & FOIA Information**

Your attendance and active participation is important for the Committee to conduct its business. Any member of a Commitee/Commission/Board who is absent from three (3) consecutive regular meetings and any intervening duly called special meetings shall be considered to have resigned from the Commitee and the vacancy shall be filled, except that the Committe may vote to waive attendance requirements in each case where illness or other extenuating circumstances make it impossible for a member to meet the attendance requirements. It shall be the responsibility of the Chairman of the Committee to notify the Town Council or Mayor's office when a member has not properly performed his/her duties.

## **Please Agree with the Following Statement**

If selected as a board member, I understand that information on this application is subject to the Freedom of Information Act (FOIA) and may be disclosed to anyone requesting this information.

✓ I Agree

Signature (type full name below)

Mechelle C. Barber