Outlook

Online Form Submittal: Burke County Appointment Application for Boards and Committees

From noreply@civicplus.com <noreply@civicplus.com>
Date Sun 6/21/2026 10:07 AM
To Morgan Buchanan <morgan.buchanan@burkenc.org>; Kat Wright <kat.wright@burkenc.org>

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Burke County Appointment Application for Boards and Committees

First Name	Chris
Last Name	Norman
Address	200 Avery Ave
City	Morganton
State	NC
Zip Code	28655
Home Phone Number	8284438105
Business Phone Number	*Field not completed.*
Cell Phone Number	8284438105
Email Address	Chris.norman@ncdps.gov
	(Section Break)
Occupation	Juvenile Court Counselor Supervisor
Retired From	*Field not completed.*
How did you hear about this opportunity?	Elected Official or County Staff
Are you currently serving on a county board or committee?	Yes
If so, please identify the board or committee.	Juvenile Crime Prevention Council

Please indicate any community interests and activities that you are involved in.	*Field not completed.*
Do you reside in the extraterritorial jurisdiction of a municipality, which is generally a 1 to 3-mile perimeter outside the city limits?	No

(Section Break)

List in order of preference the board and/or committee(s) on which you would like to serve.

First Choice	Juvenile Crime Prevention Council
Second Choice	*Field not completed.*
Third Choice	*Field not completed.*

(Section Break)

Most board or committee seats have no special requirement other than being a citizen of Burke County. Do you have special criteria that you would like to be considered for this appointment?	No
Describe why you are interested in serving on a board or committee. What goals and objectives do you have?	Insight to needs of juveniles in the community
Are you willing to attend board or committee meetings on a regular basis and comply with Article IV, Section 2-92 - Attendance, of the Burke County Code of Ordinances?	Yes
Please disclose any business or personal relationships that may be considered a conflict of interest if selected to serve on a board or committee.	None

Optional Remarks	*Field not completed.*
Optional - Click here to upload supporting documentation that you wish to be reviewed alongside your application.	*Field not completed.*

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