From: noreply@civicplus.com
To: Kay Draughn; Kat Wright
Subject: Online Form Submittal: Burke County Appointment Application for Boards and Committees
Date: Thursday, October 2, 2025 3:02:36 PM

CAUTION: Don't be quick to click! We're counting on you! This email is from an external sender! **Don't click** on links or open attachments from unknown sources. If you know this is spam delete the message. If you believe this message is a phish attack, Click the Phish Alert button above. If you are unsure what to do, contact the helpdesk at 9410.

Burke County Appointment Application for Boards and Committees

First Name	PEARL
Last Name	JONES
Address	986 ENOLA ROAD
City	MORGANTON
State	NC
Zip Code	28655
Home Phone Number	8286402651
Business Phone Number	*Field not completed.*
Cell Phone Number	8286402651
Email Address	pearlmartin41@gmail.com
	(Section Break)
Occupation	Patient Care Coordinator/ Certified Nursing Assistant
Retired From	*Field not completed.*
How did you hear about this opportunity?	Board / Committee Member
Are you currently serving on a county board or committee?	No
If so, please identify the board or committee.	*Field not completed.*

Please indicate any community interests and activities that you are involved in.	Church
Do you reside in the extraterritorial jurisdiction of a municipality, which is generally a 1 to 3-mile perimeter outside the city limits?	Yes

(Section Break)

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

First Choice	Council on Aging
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?	I have worked in nursing homes and worked one on one with the elderly
Describe why you are interested in serving on a board or committee. What goals and objectives do you have?	to have better programs for the elderly, improve conditions in nursing homes make a better life for the elderly
Are you willing to attend board or committee meetings on a regular basis and comply with Article IV, Section 2-92 -	Yes

Attendance, of the Burke County Code of Ordinances?	
Please disclose any business or personal relationships that may be considered a conflict of interest if selected to serve on a board or committee.	*Field not completed.*
Optional Remarks	I feel honored to just have the opportunity to apply for a seat on the board and serve and hopefully make a difference
Optional - Click here to upload supporting documentation that you wish to be reviewed alongside your application.	*Field not completed.*

Burke County is committed to providing an inclusive and welcoming environment for everyone and does not and shall not discriminate on the basis of race, color, religion or creed, gender, gender expression, age, national origin or ancestry, disability, marital status, sexual orientation, or military status, in any of its activities or operations.

Email not displaying correctly? View it in your browser.