From: noreply@civicplus.com
To: Kay Draughn; Kat Wright
Subject: Online Form Submittal: Burke County Appointment Application for Boards and Committees
Date: Monday, October 27, 2025 1:25:19 PM

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Burke County Appointment Application for Boards and Committees

First Name	Dolores
Last Name	Hufffman
Address	213 Bristol Street
City	Morganton
State	NC
Zip Code	28655
Home Phone Number	8284030768
Business Phone Number	*Field not completed.*
Cell Phone Number	8284030768
Email Address	dolores28655@hotmail.com
	(Section Break)
Occupation	Retired
Retired From	Partners Behavioral Health Management
How did you hear about this opportunity?	Board / Committee Member
Are you currently serving on a county board or committee?	Yes
If so, please identify the board or committee.	Adult Care & Nursing Home Community Advisory Committee

Please indicate any community interests and activities that you are involved in.	I am involved with the Adult Care & Nursing Home Committee Advisory Committee. I also support downtown functions and other functions/fundraisers throughout the county.
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	Adult Care & Nursing Home Community Advisory Committee
Second Choice	Child Protection Child Fatality Prevention Team
Third Choice	Animal Advisory Board

(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 a Master's degree and have spent the past 30+ years working in human services and working as an advocate for animals
Describe why you are interested in serving on a board or committee. What goals and objectives do you have?	I am interested in giving back to my community and speaking for those4 that have no voice.
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.	None
Optional Remarks	Thank you for considering me for these board appointments
Optional - Click here to upload supporting documentation that you wish to be reviewed alongside your application.	*Field not completed.*

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