

Town of Medway

Remote Participation Request

| I, Volence Shinas (print name), hereby request to participate remotely at t | he |
|---|-----|
| meeting of the Medway Cuttural Council (Board/Committee/Commission | on) |
| to be held on 9212 (date). I certify to the Chair that my absence is the | he |
| result of one or more of the following factors which make my physical presence unreasonably | |
| difficult: | |
| (1) Personal Illness or Disability (2) A Family or Other Emergency | |
| (3) Military Service (4) Geographic Distance (Employment / Board Business) | |
| Explanation: Our Covid quaremtine ends | |
| on 9/22/21 | |
| | |
| During the meeting, I will be at the following location: | |
| 14 Winthop St. 302-943-9319 Phone Number | |
| Valerie A. Shiras 9/2/121 | |
| Signature of Member Date | |
| Please sign and return to Chair | |
| Request received by | - |
| Chair (please print) Date | |
| Method of Participation (e.g. speakerphone | :) |
| Request Approved Request Denied* | |
| Signature of Chair Date | |

Signed form to be appended to the meeting minutes. *All Denied Requests are Final and Not Appealable.