



BOARD, COMMISSION OR COMMITTEE APPLICATION

Board, Commission or Committee: _____

Name: _____ Phone Number: _____

Address: _____

Employer: _____ E-Mail Address: _____

How long have you lived in Roanoke? _____ Years _____ Months

Are you currently registered to vote in Roanoke? Yes No

Please list any current or previous Board, Commission or Committee experience in the City of Roanoke or any other City:

What qualifications and/or experience do you possess that would assist you in serving the City of Roanoke in this position?

What do you think are the most important issues or problems facing the City of Roanoke?

Why do you want to serve on this Board, Commission or Committee?

Please provide any additional information or comments that you feel may help the City Council make a better decision in selecting you to serve on this Board, Commission or Committee:

Signature: _____

Date: _____