MADISON COUNTY, VIRGINIA
APPLICATION TO SERVE ON AN APPOINTED BOARD/COMMISSION/COMMITTEE

Application Date: _____

Name of Board/Commission/Committee: _____

Name of Applicant: _____

Home Phone: _____

Daytime Phone: _____

E-mail address: _____

E911 Address: _____

Mailing Address: _____

Do you own the property at which you reside? _____

If not, do you own other property in Madison County? _____

Employment Status: _____

Name and Address of Primary Employer: _____

Occupation/Title: _____

Years Resident in Madison County: _____

Previous Residence: _____

Education: (List Degrees and Graduation Dates):

_____

Memberships in Fraternal, Business, Church or Social Groups:

_____

Memberships in Civic and Charitable Organizations, and other Activities or interests:

_____

Reason(s) for desiring to serve on this Board/Commission/Committee, and your qualifications:

_____

_____

Please attach other information relevant to your application and be aware that t this document and anything information submitted will be available for review by the public under the Freedom of Information Act.

Please return completed forms and direct questions to:

Jacqueline Frye
jfrye@madisonco.virginia.gov
414 N. Main Street
P.O. Bo 705
Madison, VA 22727
540/948-7500x1101

Date Received: _____