

CITIZEN APPLICATION FARMVILLE ELECTION DISTRICT 101

	Date		
Name			
Home Address			
City	State	Zip Code	
Home Telephone	Number	FAX	
E-Mail Address			
Optional Information	tion Which May Prove Helpful:		
Occupation			
Former Occupation	on, If Retired		
Education: High	School		_Year
Colle	ge/Technical School		_Year
Grad	uate School		_Year
Milita	ary Service		_Years
Degre	ees/Other		
Past Board, Comn	nission, and Committee Assignments		
~ .	encouraged to answer the follo	~ 1	•
pages if require	2		
	your interest and/or reason to seek es that qualify you for this appointme		of Supervisors and
Please list any cur organizations.	rrent or past involvement in the Princ	ee Edward Community, to in	nclude community

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State any leadership positions you may have held in the past or are currently holding, or leadership positions you have held.
Do you currently have a family member who is employed by the county or any constitutional office? If yes, please explain.
Do you have a business relationship with any county department or constitutional office?
By submitting this application to the County of Prince Edward, I hereby certify that all information contained herein is true and complete and I consent to the dissemination of this document to the general public. If appointed, I understand that I will be required to fully comply to the requirements of the Virginia Conflict of Interest Act, Virginia Freedom of Information Act and other applicable sections of the Code of Virginia.

Please Return Application To:
Prince Edward County Administrator's Office
Post Office Box 382, 111 South Street, 3rd Floor
Farmville, Virginia 23901
Tel: 434-392-8837 -- FAX: 434-392-6683
e-mail: info@co.prince-edward.va.us

Signature

Date