

Boards & Commissions Reappointment Application



I am interested in continuing to serve on the following board/commission.

BZR

As an applicant/member of a Council-appointed Board or Commission, your name, address, and phone number will be available to the press and public. Information will be kept on file for three years. Public discussion of information contained herein may occur in the meeting at which appointments are considered by the City Council.

Mr. Mrs. Ms. Miss. Dr. (Please type or print clearly)

Name: Stoltzfus Glen D Date: 3-8-17  
(Last) (First) (M.I)

Home Address: 981 Summit Ave, H'burg, VA Zip Code: 22802

Phone Number: 540-820-3300 Alternate Phone: \_\_\_\_\_

Occupation: Retired Gen Contr. Employer/Organization: \_\_\_\_\_

E-mail: glen@harrisonburg.net Harrisonburg resident for 25 years.

How many years have you served: 5 How many terms have you served: 1

Additional comments: