



Boards & Commissions Reappointment Application

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

Storm Water Advisory Commission

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. ☒ X

(Please type or print clearly)

Name: Alexander Rob May 18, 2020
(Last) (First) (M.I) Date:

Home Address: 977 S. Dogwood Dr. Harrisonburg, VA Zip Code: 22801

Phone Number: 540-568-3771 Alternate Phone: _____

Occupation: College Professor Employer/Organization: James Madison University

E-mail: alexanrw@jmu.edu Harrisonburg resident for 9 years.

How many years have you served: 3 How many terms have you served: 1.5

Additional comments:

I enjoy service on SWAC and hope that I bring a policy expertise that is useful.

