## **Boards & Commissions Reappointment Application**



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

□Mr. ☑Mrs. □Ms. □Miss. □Dr.		(Please type or print clearly)
Name: Shifflett Eilen (First)	$\mathcal{M}$	Date:
(Last) (First)	(M.I)	0.000
Home Address: 1411 Fieldale Pl. Ha	rrisonburg, VA	Zip Code:
Phone Number: 540-435-7886	Alternate Phone:	<b>Zip Code</b> : 22801 540-578-3088
Occupation: UCLUSES	Employer/Organization:	
E-mail: Shifflem@jmu edu	Ha	rrisonburg resident for <u>L</u> years.
How many years have you served:	How many terms	s have you served:

Additional comments:

considered by the City Council.