

## Application Form

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### Profile

Prefix Laurinda First Name F Middle Initial Peters Last Name  Suffix

laurindapeters@gmail.com  
Email Address

43 MAPLEHURST AVE  
Home Address  Suite or Apt   
HARRISONBURG  
City VA State 22801  
Postal Code

### How many years have you been a resident of Harrisonburg?

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Primary Phone  Alternate Phone

Employer  Job Title

**Demographics** - (Submission of this information is voluntary and will not subject you to any adverse treatment should you choose to not complete)

### Ethnicity

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None Selected

### Gender

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None Selected

### What is your age?

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None Selected

### Are you reapplying for a current position you hold? \*

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None Selected

### Which Boards would you like to apply for?

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None Selected

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### Interests & Experiences

Please tell us about yourself and why you want to serve.

**Why are you interested in serving on a board or commission?**

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**What other interests or concerns do you have regarding the community?**

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**What relevant experience or education do you have to this board or commission?**

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**Please list any past or present community involvement e.g. City Council, Boards and Commissions, Citizen Academy, etc. in Harrisonburg or elsewhere:**

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Upload a Resume

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**EPSAC Applicants only**

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**Bike/Pedestrian Subcommittee Applicants only**

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