

Boards & Commissions Reappointment Application



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

Harrisonburg Rockingham Community Services Board

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: Bland Judy Date: 6/17/19
(Last) (First) (M.I.)

Home Address: 43 Fry Ave. Harrisonburg, VA Zip Code: 22801

Phone Number: 540-434-5423 Alternate Phone: _____

Occupation: Retired Employer/Organization: _____

E-mail: _____ Harrisonburg resident for 39 years.

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

Additional comments:

I appreciate the opportunity to continue to serve on this Board. The HRCSB provides a highly valuable service to our community.