



Centreville Board of Supervisors of Elections Application

Citizens Interested in Seeking Appointment to the Centreville Supervisors of Elections Board are asked to Complete This Form.

Name _____ Date _____

Address _____

Phone Number _____ Cell Phone Number _____

Email Address _____

How long have you lived in Centreville? _____

1.) Why are you interested in a position on the Supervisors of Elections Board?

2.) Have you served on other municipal or county boards and / or commissions? Describe:

3.) What, in your opinion, would constitute a conflict of interest for an individual in public service?
