

Town of Hurt, Virginia
Application for Interim Councilmember Appointment

This form must be completed and submitted on or before the announced deadline in order to be considered. When a town council seat vacancy occurs, the remaining members typically interview qualified candidates and appoint an individual to fill the vacant seat until the next election (special or scheduled, as required by law).

Date of Application: _____

Applicant Name: _____

Contact Phone Number _____

Address: _____

E-Mail Address: _____

Are you a United States citizen? ☐ yes ☐ no

Do you reside within the Hurt corporate limits? ☐ yes ☐ no

Have you ever been convicted of a felony? ☐ yes ☐ no

If selected, what ideas or recommendations would you bring to the table?

Applicant Signature _____ Date _____

Office Use Only

Date Received _____

By (Town Representative) _____

