

**City of Glen Rose Volunteer Application**

Full Name: CONNIE KIRK

Physical Address: [REDACTED] Glen Rose 76043

Mailing Address: (SAME)

Phone No: [REDACTED] Alternate No: \_\_\_\_\_

Email: [REDACTED]@com

How long have you resided in the City of Glen Rose? 31 Yrs \_\_\_\_\_ Mos  
How long have you resided in the State of Texas 10 Yrs \_\_\_\_\_ Mos  
Are you registered to vote in the City of Glen Rose  Yes \_\_\_\_\_ No

What skills, knowledge or previous experience do you possess that will be beneficial to the citizens of the City? CITY COUNCIL - 1 yr  
MAYOR 3 years

Briefly describe why you would like to be appointed to the Glen Rose City Council.  
Because I care.

The above information is true and accurate to the best of my knowledge:  
Connie Kirk \_\_\_\_\_ Date 8-17-23  
Signature