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Roanoke Valley-Alleghany
REGIONAL
 commission

Coordinate requests with City Manager/Town Manager/County Administrator who will make final submission of 2 top projects)

WORK PROGRAM SUGGESTION FORM	
Project Title:	Rank: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 Rank if submitting more than one project.
Scope of Project: <input type="checkbox"/> Regional <input type="checkbox"/> Locality _____	
Commission Role: <input type="checkbox"/> Lead <input type="checkbox"/> Partner	
Type: <input type="checkbox"/> Transportation/Transit <input type="checkbox"/> Community Development <input type="checkbox"/> Economic Development <input type="checkbox"/> Environmental <input type="checkbox"/> Other _____	
Purpose:	
Outline of Work/Tasks:	
Deliverables"	
Schedule/Timeframe:	
Project Contact:	
Stakeholders:	