



APPLICATION FOR VOLUNTEER POSITIONS

New Application

Re-application

Board of Adjustments

Parks and Recreation Board

Day Meetings

Planning Board

Night Meetings

Retirement Board

Name: _____
(First) (Middle) (Last)

Present Address: _____
(Street, P.O. Box #, Apt #)

(Mailing Address)

(City) (State) (ZIP Code)

Home Phone #: _____ Alternate Phone #: _____

Occupation: _____

Business Phone: _____ E-Mail Address: _____

Do you reside within the City Limits? Yes No How Long: ? _____

Please rank your Board Preferences: 1.) _____

2.) _____

3.) _____

Have you ever served on a volunteer board or in a volunteer capacity with the City of Lake Alfred before?

Yes: _____
(Board Name and Dates of Service)

No

Why would you like to serve on this board: _____

What special skills would you bring to this position? _____

List fields of work experience: _____

List any licenses and/or degrees (location and year): _____

Local References: (other than relatives)

Name:	Telephone Number:
Address:	E-mail Address
	Alternate Number:
Name:	Telephone Number:
Address:	E-Mail Address
	Alternate Number:
Name:	Telephone Number:
Address:	E-mail Address
	Alternate Number

EDUCATION:

SCHOOL	NAME/LOCATION OF SCHOOL	DATE ATTENDED	COURSE OF STUDY	YEARS OR CREDITS COMPLETED	DID YOU GRADUATE?	DEGREE / DIPLOMA
COLLEGE						
*HIGH						

I acknowledge that the above information is true, complete and correct to the best of my knowledge and belief.

SIGNATURE OF APPLICANT: _____ DATE: _____