



# VOLUNTEER APPLICATION

## CITY OF LANGLEY

112 Second St./PO Box 366 Langley, Washington 98260 (360) 221-4246

Position \_\_\_\_\_ Department \_\_\_\_\_ Date \_\_\_\_\_

Name: Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_

Street Address \_\_\_\_\_ Home Phone \_\_\_\_\_

Mailing Address (if different) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Daytime Phone \_\_\_\_\_

Email address \_\_\_\_\_

Are at least 18 years old?  Yes  No If not, please specify your age \_\_\_\_\_

### **BACKGROUND:**

Education \_\_\_\_\_

Occupation (s): \_\_\_\_\_

Other Volunteer Positions: \_\_\_\_\_

Hobbies: \_\_\_\_\_

Other applicable experience: \_\_\_\_\_

### **SKILLS:**

List Applicable Skills \_\_\_\_\_

### **DESIRE:**

Briefly describe why you are interested in volunteering:

\_\_\_\_\_

\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_