



VOLUNTEER APPLICATION

CITY OF LANGLEY

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

Position _____ Board/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 _____

Days of the week/times available for interview: _____

BACKGROUND: Please fill out and include a resume if available.

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: _____