

CITY OF WATERVILLE

Application for Volunteer Service Please Print

		Date	Date of Application			
Name	Last	First		Middle		
Address	Street	City	State	Z ip		
Phone	Home	Work	Cell			
E-mail Ac	ldress:					
Education	n: (Please check the h	ighest level attained)				
Hig	gh School Graduate	Some College Courses	College Graduate	Post Graduate		
College D	Degree or Major:					
Other Sp	ecial Training:					
		e summarize your recent emp ssignments and volunteer activ		our present or last job.		
1. Emplo	oyer	Wo	rk Performed:			
Addre	SS					
Job Ti	tle					
Super	visor					
Dates	Employed: From	То				
2. Emplo	oyer	Wo	rk Performed:			
Addre	SS					
Job Ti	tle					
Superv	visor					
Dates	Employed: From	То				

Length of resid	lency in Water	ville:			
Have you had	any previous ex	xperience in city government	or community affair	s?	
Yes	No	No If yes, please explain:			
Please list the ryou:	name, address a	and phone number of three (City residents who ca	n serve as references for	
The City of W	aterville. Pleas	low are the various Boards, C e indicate on which of the fol rving. Please designate your f	llowing Boards, Con	missions or Committees	
	Planning Cor	nmission		Public Safety	
	Board of Zoning Appeals			Finance	
	Tree Commi	ssion		Civil Service	
	Historic Dist	rict Commission		Public Works	
	Parks & Reco	reation			
	Other		Please Specify		
Please state bri	efly why you fe	el qualified for appointment:			
Please list any	other particular	r interests or skills you would	like to share with the	e City:	
			Signature		