Town of Rosendale Volunteer Application

Please fill out a form for each Board / Commission / Committee you are applying for.

Last Name		First		Middle In	itial
Mailing Address					
Street Address		City		Zip Code	
Home Phone #	Bus	siness Phone #		Cell Phone #	
E-Mail address					
Commission or Cor	mmittee volunteering	for:			
I have applied for th	nis position before:	(please circle)	yes	no	
	ground experience, edich you are applying:	lucation or special sk	ills that per	tain to the committe	e or
Resume attached:	(please circle)	Yes		no	
Age 18 or over:	(please circle)	Yes		No (if no, please provide age)	
Sionature			Da	to.	