



# VOLUNTEER PROGRAM

Appendix E

## Application For County **Boards / Commissions / Committees**

**(Please type or print clearly)**

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

Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_  
*FIRST MIDDLE LAST*

Home Address: \_\_\_\_\_  
*NUMBER STREET CITY STATE ZIP*

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Work Address: \_\_\_\_\_  
*NUMBER STREET CITY STATE ZIP*

Work Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Education: \_\_\_\_\_

Local References (names and phone numbers): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**I am interested in serving (please check one or more):**

- |  |   |
|--|---|
| <input type="checkbox"/> Accessible Community Advisory Committee | <input type="checkbox"/> Horticultural Pest and Disease Board |
| <input type="checkbox"/> Behavioral Health Advisory Committee    | <input type="checkbox"/> LEOFF I Disability Board             |
| <input type="checkbox"/> Board of Equalization                   | <input type="checkbox"/> Mosquito Control District Board      |
| <input type="checkbox"/> Civil Service Commission                | <input type="checkbox"/> Park Board                           |
| <input type="checkbox"/> Drainage Improvement District Board     | <input type="checkbox"/> Planning Commission                  |
| <input type="checkbox"/> Other: _____                            |   |

How long have you lived in Benton County? \_\_\_\_\_

Is this an application for reappointment? \_\_\_\_\_

If yes, how many years have you served on this Board/Commission/Committee? \_\_\_\_\_



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Why are you applying for this appointment?

Which of your personal and/or professional interests prompted you to apply for this appointment?

Have you every served on any other Board, Commission, or Committee? If yes, please list:

Please list your qualification for this appointment (include skills, activities, training, education):

What are your community interests (committees, organizations, special activities)?

Please list any accommodations you need to perform volunteer duties:

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We welcome your willingness to serve Benton County. For more information on the above, please contact the County's Human Resources Department or via email at [hr@co.benton.wa.us](mailto:hr@co.benton.wa.us).

Pursuant to the Washington Public Disclosure Act, (RCW 42.56), this form constitutes a public record and is subject to public release upon request. Prior to release, the following information may be redacted pursuant to RCW 42.56.250(3): Residential addresses, residential telephone numbers, personal wireless telephone numbers, personal electronic mail addresses, social security numbers, driver's license numbers, identicard numbers, and emergency contact information of employees or volunteers of a public agency, and the names, dates of birth, residential addresses, residential telephone numbers, personal wireless telephone numbers, personal electronic mail addresses, social security numbers, and emergency contact information of dependents of employees or volunteers of a public agency.

**Applicants are considered for appointment without regard to race, color, religion, gender, national origin, sexual orientation, age, genetic information, marital or veteran status, or the presence of any disability.**