



First Name: _____ Last Name: _____

Home Phone #: _____ Mobile Phone #: _____

Daytime Phone #: _____ Email Address: _____

Address: _____

City: _____ State: _____ Zip Code: _____

1. Will you have the time required to fulfill the duties of this position?

Yes No

2. Are you able to attend the necessary meetings?

Yes No

3. Have you volunteered for a HRCA Committee before?

Yes No

4. Please attach a current resume.

5. Please attach a letter of interest or statement of qualifications and experience indicating (a) why you are interested in serving on this committee (b) state your background, experience, qualifications, and education are best suited to serving on the committee, and (c) why you should be considered for appointment.

I certify that this report is true, complete, and correct to the best of my knowledge.

Printed Name Date

Signature