



ESSEX YOUTH COMMISSION

VOLUNTEER APPLICATION FORM

The Essex Youth Commission is looking for assistance in running programs for the youth of the town, and surrounding areas. Please share your talents and enthusiasm. All individuals will be required to undergo a CORI check. Please print clearly.

Full Name: _____

Street Address: _____

City: _____ Zip: _____

Emergency Contact: _____ Phone: _____

Email Address: _____

If student, Name of School: _____ Grade/Year: _____

What is your AVAILABILITY?:

__Monday __Tuesday __Wednesday __Thursday __Friday __Saturday __Sunday

I would prefer to be scheduled: __ Mornings __ Afternoons __ Evenings __ No preference

What areas are you interested in? (Check all that apply):

Advertising events:___ Organizing an activity/event:___ Running Events:___ Helping at an event:___
Supervise children:___ Graphic design ___ Writing/editing publicity articles ___ Grant applications:___
Anything:___ Other:_____

Please list three (3) references (current/former teacher, employer, or supervisor). No relatives or close friends please.
*Please inform all references that you have applied for a volunteer position with the EYC.

1) Name:_____ Phone:_____
Email:_____
Relationship to you:_____

2) Name:_____ Phone:_____
Email:_____
Relationship to you:_____

3) Name:_____ Phone:_____
Email:_____
Relationship to you:_____

Please bring this form to Town Hall, mail to Essex Youth Commission, 30 Martin Street #302, Essex, MA 01929 or email to: sslater@essexma.org. Thank you so much! We will be in touch!
