



VILLAGE OF VINTON  
VOLUNTEER APPLICATION  
BOARDS AND COMMISSIONS

NAME: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

Street City Zip

MAILING ADDRESS: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

HOME PHONE: \_\_\_\_\_ MOBILE PHONE \_\_\_\_\_

PLACE OF EMPLOYMENT: \_\_\_\_\_

EMPLOYER ADDRESS: \_\_\_\_\_

Street City Zip

BUSINESS PHONE: \_\_\_\_\_

Please review the following questions: *Circle Yes or No*

Are you eighteen years of age or older?	Yes	No	
Can you be contacted at your place of employment?	Yes	No	
Can you read and write the English language?	Yes	No	
Can you attend meetings during the working hours of 8:00am – 12:00pm?	Yes	No	
Can you attend meetings during the working hours of 12:00pm – 5:00pm?	Yes	No	
Can you attend evenings after 5:00pm?	Yes	No	
Can you attend meetings on Saturdays?	Yes	No	
I have been a resident of Vinton since: _____			
Please indicate how many hours per month you can commit to meetings	2	3	4
Please indicate how many hours per month you can commit to events	4	6	8

I am interested in being considered for appointment to the following Village of Vinton board(s) Or commission(s):  
*Check all that apply*

*OTHER NOT LISTED:* \_\_\_\_\_

**BOARDS AND COMMISSIONS**

- |  |  |
|--|--|
| <input type="checkbox"/> Planning and Zoning Commission  | <input type="checkbox"/> Vinton Tree Board                 |
| <input type="checkbox"/> Economic Development Commission | <input type="checkbox"/> Tax Accountability Committee      |
| <input type="checkbox"/> Keep Vinton Beautiful           | <input type="checkbox"/> Veterans Group                    |
| <input type="checkbox"/> Neighborhood Watch              | <input type="checkbox"/> Community Emergency Response Team |
| <input type="checkbox"/> Youth Advisory Council          |  |

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