

APPLICATION DATE:



## VILLAGE OF DOBBS FERRY VOLUNTEER APPLICATION FORM

\*VILLAGE OF DOBBS FERRY RESIDENTS SHOULD SELECT THE BOARDS/COMMITTEES/COMMISSIONS THAT THEY ARE INTERESTED IN SERVING ON AND RETURN THE COMPLETED FORM AND A COPY OF YOUR RESUME TO THE VILLAGE CLERK AT: VILLAGE HALL, 112 MAIN STREET, DOBBS FERRY, N.Y. OR VIA EMAIL AT: [LDREAPER@DOBBSFERRY.COM](mailto:LDREAPER@DOBBSFERRY.COM)

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|--|--|
| <input type="checkbox"/> ARCHITECTURAL & HISTORIC REVIEW BOARD | <input type="checkbox"/> BEAUTIFICATION COMMITTEE        |
| <input type="checkbox"/> CONSERVATION ADVISORY BOARD           | <input type="checkbox"/> BUDGET COMMITTEE                |
| <input type="checkbox"/> ETHICS BOARD                          | <input type="checkbox"/> DOBBS FERRY TREE CONSORTIUM     |
| <input type="checkbox"/> HOUSING BOARD OF APPEALS              | <input type="checkbox"/> DOWNTOWN IMPROVEMENT TASK FORCE |
| <input type="checkbox"/> LIBRARY BOARD                         | <input type="checkbox"/> SUSTAINABILITY TASK FORCE       |
| <input type="checkbox"/> NOMINATING COMMITTEE                  | <input type="checkbox"/> FACILITIES COMMITTEE            |
| <input type="checkbox"/> PARKS & RECREATION COMMISSION         | <input type="checkbox"/> FERRY FESTA COMMITTEE           |
| <input type="checkbox"/> PLANNING BOARD                        | <input type="checkbox"/> HISTORIC DISTRICT TASK FORCE    |
| <input type="checkbox"/> TRAFFIC COMMITTEE                     | <input type="checkbox"/> SENIOR ADVOCACY COMMITTEE       |
| <input type="checkbox"/> TREE COMMISSION                       | <input type="checkbox"/> YOUTH SERVICES COUNCIL          |
| <input type="checkbox"/> ZONING BOARD OF APPEALS               |  |

### **PLEASE PROVIDE THE FOLLOWING INFORMATION:**

NAME:

ADDRESS:

EMAIL ADDRESS:

PHONE NUMBER:

AVAILABILITY: ☐ MONTHLY ☐ SEMI-MONTHLY ☐ WEEKLY ☐ AS NEEDED ☐ ANYTIME

PLEASE INCLUDE ANY PREVIOUS EXPERIENCE SERVING ON THE VILLAGE OF DOBBS FERRY BOARDS, COMMISSIONS OR COMMITTEES. BE SURE TO INCLUDE DATES OF SERVICE:

PLEASE INCLUDE ANY TRAINING OR EXPERIENCE YOU WOULD LIKE US TO CONSIDER IN REVIEWING YOUR APPLICATION:

IN THE SPACE BELOW, PLEASE EXPLAIN WHY YOU ARE INTERESTED IN SERVING ON A BOARD, COMMISSION OR COMMITTEE AND HOW YOU CAN CONTRIBUTE TO THE WORK: