

**WORK TEAM  
VOLUNTEER APPLICATION**

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

**ADDRESS:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

**WORK TEAM:** \_\_\_\_\_

**NO. AND POSITION ON WORK TEAM:** \_\_\_\_\_

*(See Work Team Membership Roster)*

**INTEREST IN PARTICIPATING:**

**QUESTIONS / CLARIFICATIONS:**

**CLASSIFIED**    **Position & Location:** \_\_\_\_\_

**CERTIFIED**    **Location:** \_\_\_\_\_

**ADMINISTRATOR**    **Position & Location:** \_\_\_\_\_

**If you have served, or are serving on another district Work Team or Committee, please indicate the Work Team/Committee(s).**

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