

City of Spearfish



Board and Committee Application

Contact Information

Name	
Street Address	
Mailing Address <i>if different</i>	
City ST ZIP	
Phone	
Employer and Your Position	
E-Mail	

Interested in Serving on following Board(s)

- | | | |
|---|--|---|
| <input type="checkbox"/> Parks, Recreation Forestry | <input type="checkbox"/> Historic Preservation | <input type="checkbox"/> Visit Spearfish |
| <input type="checkbox"/> Library Board | <input type="checkbox"/> Arts in Public Places | <input type="checkbox"/> Downtown Improvement |
| <input type="checkbox"/> Fassbender Collection | <input type="checkbox"/> Planning Commission | <input type="checkbox"/> Hotel Improvement District |
| <input type="checkbox"/> Airport Board | | |

Please indicate days and times you are available:

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Interests

Tell us in which areas you are interested in volunteering

- | | |
|---|---|
| <input type="checkbox"/> Administration | <input type="checkbox"/> Deliveries |
| <input type="checkbox"/> Events | <input type="checkbox"/> Phone bank |
| <input type="checkbox"/> Field work | <input type="checkbox"/> Newsletter production |
| <input type="checkbox"/> Fundraising | <input type="checkbox"/> Volunteer coordination |

Special Skills or Qualifications

Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports.

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Why are you interested in serving on a citizen board?

Summarize your interest.

Previous Volunteer Experience

Summarize your previous volunteer experience.

Miscellaneous Questions

Are you a City of Spearfish resident?	
Do you own property in Spearfish?	
Are you a registered voter?	
Are you currently serving on a City Board or another board for any other governmental agency? If yes, please describe.	

Responsibilities Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal. I understand the responsibility associated with being a Board member and I will commit to adequate time to serve on the respective board.

Name (printed)	
Signature	
Date	

Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

Please return this form to the City Finance Office at 625 N. 5th Street, Spearfish.

Thank you for your interest in volunteering with us!