



TOWN OF DIGHTON

Volunteer Information Form

Name: _____

Address: _____

Phone: _____ Cell: _____ Email: _____

Occupation: _____

Board/Committee for which you are applying:

Board/Committee (2nd choice if any):

Please outline any relevant experience for the position sought:

Please outline any education or training that may be relevant to the appointment sought:

Please list any prior volunteer experience or service on town boards:

Please list special skills or talents pertinent to the position sought:

Please explain why you are applying for this position:

Date: _____

This form will serve as your official application for a volunteer position. You may attach a resume to said form. Please submit your application by email to: keasterday@townofdighton.com, by fax: (508) 669-5667, or by mail: Town of Dighton, Attention: Board of Selectmen, 979 Somerset Avenue, Dighton, MA 02715.