

**TOWN OF WEST POINT**  
**COMMUNITY SERVICE APPLICATION**  
*(Please Print or Type)*

Application For: \_\_\_\_\_ Filing Date: \_\_\_\_\_

Applicant's Name: \_\_\_\_\_  
*(Last)* *(First)* *(Middle)*

Home Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone: Home: \_\_\_\_\_ Business: \_\_\_\_\_

Email Address: \_\_\_\_\_

Employer: \_\_\_\_\_

Since: \_\_\_\_\_

Are You Over 18?  Yes  No      Are you a registered voter in West Point?  Yes  No

How long have you been a resident of West Point? \_\_\_\_\_

If married, give spouse's name: \_\_\_\_\_

Children's names and ages:

_____ <i>(Name)</i>	_____ <i>(Age)</i>	_____ <i>(Name)</i>	_____ <i>(Age)</i>
_____ <i>(Name)</i>	_____ <i>(Age)</i>	_____ <i>(Name)</i>	_____ <i>(Age)</i>
_____ <i>(Name)</i>	_____ <i>(Age)</i>	_____ <i>(Name)</i>	_____ <i>(Age)</i>

**EDUCATIONAL EXPERIENCE**

High School Attended: \_\_\_\_\_ Year Graduated \_\_\_\_\_

Advanced school or training (Name, year and degree or certification)

_____ <i>(School)</i>	_____ <i>(Year)</i>	_____ <i>(Degree or Certification)</i>
_____ <i>(School)</i>	_____ <i>(Year)</i>	_____ <i>(Degree or Certification)</i>

Professional and Civic experience: \_\_\_\_\_

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Other interests and reasons which may be helpful in selecting you for Community Service: \_\_\_\_\_

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Why do you want to serve on a Board or Commission?

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Please email form to:

Karen Barrow

[kmbarrow@west-point.va.us](mailto:kmbarrow@west-point.va.us)