



Volunteer MPS Advisor Application Form

Name _____ Phone _____

Address _____ email _____

Relevant Experience and/or Employment (attach a resume if relevant) _____

Why are you interested in Volunteer MPS? _____

Area(s) of expertise/Contribution you feel you can make _____

Other volunteer commitments _____

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For Staff Use

Nominee has had a personal meeting with either coordinator, Council chair,

or Staff.

Date _____

Nominee reviewed by the committee.

Date _____

Nominee attended an Advisor meeting.

Date _____

Nominee interviewed by the board.

Date _____

Action taken by the board _____
