

Volunteer Application



PART 1: PERSONAL INFORMATION				
NAME (LAST, FIRST MIDDLE INITIAL)	PREFIX (MR, DR, ETC)	SUFFIX (JR, III, ETC)		
	GENDER	FEMALE	DOB	
HOME ADDRESS			HOME E-MAIL	
			HOME TELEPHONE	
			FAX	
BUSINESS ADDRESS (If applicable)			BUSINESS E-MAIL	
			BUSINESS TELEPHONE	
			BUSINESS FAX	
PREFERRED MAILING ADDRESS	PREFERRED E-MAIL ADDRES	S	MOBILE TELEPHONE	

PART 2:	BACKGROUND INFORMATION			
CIVILIAN BACKGROUND (Briefly	describe civilian experience: Field of Work, Positions Held, etc.)			
MILITARY BACKGROUND (If applicable) (Military experience is NOT a prerequisite for Committee membership)		SERVICE AFFILIATION:		
			CURRENT STATUS (Ret, AD, Drilling, etc.)	
			YEAR OF RETIREMENT (If applicable)	
SPECIALIZED SKILLS (Please describe any special skills which might be useful to the Committee: Public Speaking, Mediation Training, Marketing, Event Planning, etc.)				
INTEREST AREA Is there a specific area of ESG Outreach, Ombudsman Suppo	R activities that interests you (e.g., Employer Outreach, Military rt)? If so, please specify.	INVOLVEMENT How many hours per month (or week) are you able to volunteer at the present time?		

PART 3: COMMITTEE USE ONLY				
REQUIRED FORMS				
DD2793 VOLUNTEER FORM FMS 223	31 DIRECT DEPOSIT FORM 📋 🛛 PRIVACY ACT FORM 📋			
INITIAL COMMITTEE ASSIGNMENT (i.e., Ombud, Employer Outreach, General, etc.	.) DATE APPOINTED (Month/Year)			
REMARKS				
SIGNATURE OF ESGR COMMITTEE CHAIR (or Designated Representative)	DATE SIGNED			
FORWARD TO NCESGR ESGRN	et ACCOUNT ESTABLISHED			
FMS 2231 DIRECT DEPOSIT FORM (ORIG)	NOTE: FIELD COMMITTEES ARE NOT AUTHORIZED TO ESTABLISH			
PRIVACY ACT FORM (COPY)	ESGRnet ACCOUNTS FOR ANY VOLUNTEER UNTIL ALL THREE (3) FORMS			
	LEFT ARE COMPLETED AND FORWARDED TO NCESGR.			
ESGR Volunteer Application Form (DEC 05)				