

RAO Volunteer Application

I would like to become a volunteer in the Retiree Activities Office

Name: (Last, First, MI) Age

Name of Spouse/Next of Kin

Mailing Address

City State Zip Code

Home Phone w/ Area Code Work Phone w/ Area Code

Branch of Service Retirement Date Years of Service

Retired Grade Social Security No.

There are two shifts each day Mon-Fri. The shifts are from 9 a.m. to noon and Noon to 3 p.m.

Which Day/Days of the Week Morning/Afternoon

Comments: _____

SIGNATURE
