

Oakland Cable TV Committee
 One Municipal Plaza
 Oakland, NJ 07436
 201-405-7590 / 201-405-7592 Fax
 com72@optonline.net

Volunteer Application

Contact Information

Name		Home Phone	
Street Address		City ST ZIP Code	
Work Phone		Cell Phone	
E-Mail Address		Emergency Contact	

Availability

During which hours are you available for volunteer assignments?

- Weekday mornings
 Weekday afternoons
 Weekday evenings
 Weekend mornings
 Weekend afternoons
 Weekend evenings

Experience

What experience have you had (check as many as apply)

- Video Camera
 Video Graphics
 On Air Personality
 Audio
 Events
 Music Composition/Creation
 Editing Equipment
 Community Bulletin Board
 Volunteer Coordination

Please amplify on your choices on back page under Skills

What Motivates You to Join the Oakland Television Committee?

Special Skills or Qualifications

Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports.

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statement, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

Name (printed)	_____	
Signature/Applicant	_____	Date
Signature/Parent Guardian	_____	Date

Thank you for completing this application form and for your interest in volunteering with Oakland TV.