



8850 Rixlew Ln. Manassas, VA 20109
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pswcd@pswcd.org

571.379.7514
fax: 571.379.8305

**Intern / Volunteer
Application Form**

1. Name _____ Date _____

Address _____

City _____ State _____ Zip _____

Drivers License number _____

E-mail address _____

2. Day phone () _____ other phone () _____

3. Proof of age, must be minimum 18 years of age.

4. Circle the last year in school that you have completed.

High School 12

College 1 2 3 4 5+

5. What special skills, education or experience do you have that might help you in your work with the district?

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6. What position are you interested in? _____

7. What do you hope to gain from this opportunity? _____

8. When would you like to start? What length of time are you willing to commit? Hours per week and number of weeks or months?

9. List 2 references Name and contact phone.

Signature _____ Date _____

Submit to: PWSWCD, 8850 Rixlew Lane, Manassas, VA 20109

E-Mail: jayyankey@pwsxcd.org

Fax: (571) 379-7514 Attn: Jay Yankey, District Manager