CITY OF DENHAM SPRINGS OLD CITY HALL

115 Mattie Street Patti Smith Peairs, Director 225 667-7512 oldcityhall@cityofdenhamsprings.com

DOCENT APPLICATION FORM

PERSONAL INFORMATION				
Name:				
Address:				
Telephone: Home (<u>)</u>				
	Cell (<u>)</u>			
Email:				
Birth Date:				
	REFERENCES			
Work or Personal Reference #1:				
Name & Relationship:				
Address:				
Telephone:				
Email:				
Work or Personal Reference #2:				
Name & Relationship:				
Address:				
Telephone:				
Email:				

AVAILABILITY

Please indicate your availability for volunteer assignments below:

Day: Monday Tuesday Wednesday Thursday Friday

Saturday Sunday

Time: Morning (8:00 a.m. - 12:00 p.m.)

Afternoon (12:00 p.m. - 5:00 p.m.)

No Preference

Please answer the following questions. If more space is needed, write on a separate sheet and include with your application. Why would you like to be a docent?
What related experience will you bring to your position as a docent? Include wor and volunteer experience, as well as any relevant hobbies or interests.
Please tell us about any other special skills or abilities (for example, fluency in another language).
How did you hear about the docent program?

The City of Denham Springs is committed to diversity. Women, minorities, senior citizens and people with disabilities are encouraged to apply. Reasonable accommodations are available upon request.

Acceptance into the docent program is subject to successful completion of a background investigation.

Please return your completed application by mail, fax, or email to:

Old City Hall 115 Mattie Street Denham Springs, Louisiana 70726

PHONE: (225) 667-7512 FAX: (225) 667-7993

EMAIL: oldcityhall@cityofdenhamsprings.com

Additional Comments:
