

CONSUMER PROTECTION AND ANTITRUST BUREAU
VOLUNTEER CONSUMER AFFAIRS SPECIALIST APPLICATION FORM

Thank you for your interest in the Volunteer Consumer Affairs Specialist Program at the New Hampshire Department of Justice. To receive consideration of a Consumer Affairs Specialist position, please complete this form and return it to the volunteer coordinator at doj-cpb@doj.nh.gov. You may also mail the application or hand deliver it to the following address:

New Hampshire Department of Justice
Consumer Protection and Antitrust Bureau
1 Granite Place South
Concord, NH 03301

Your application will be reviewed, and you will be contacted by the volunteer coordinator to arrange an interview to discuss your interest in this position. All information on this form will be kept confidential. Please be advised that if selected, you will be subject to a criminal background check prior to starting your volunteering.

First Name: _____

Last Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Mailing address: _____

Home Phone: _____ Cell Phone: _____

Email: _____

Date of Birth: _____ Social Security #: _____

What days are you usually available: Mon ____ Tues ____ Wed ____ Thurs ____ Fri ____

If selected for a volunteer position, I will commit to work a minimum of six (6) hours each week for a minimum of one (1) year: YES NO

How many hours are you available per week: _____

Do you prefer morning _____ or afternoon _____

Do you have skills, special interests or experience that you would like us to consider:

Languages spoken:

Computer Skills:

Education: Beginning with your high school, please list the name, address, city and state of all educational institutions you have attended or graduated

Employment: Please list your employment history

Volunteer and other experience:

Do you have any physical conditions or disability which may limit your ability to perform any volunteer duties:

How did you hear about the Volunteer Consumer Affairs Specialist Program:

I certify that all of the information that I have provided on this form to the New Hampshire Department of Justice is true and accurate.

Date: _____ **Signature:** _____