

**Virginia Well Owner Network Volunteer Application**

**Applicant Information**

Last Name		First Name		Date
Address			Phone ( ) -	
City		State, Zip		Email:
County	Gender	Date of Birth	Occupation	

Questions in this section are for Virginia Cooperative Extension record-keeping purposes:

<p><b>I live:</b></p> <input type="checkbox"/> On a farm <input type="checkbox"/> Rural area or town under 10,000 <input type="checkbox"/> Town or city of 10,000-50,000 <input type="checkbox"/> Suburb or city over 50,000 <input type="checkbox"/> City over 50,000	<p><b>Gender:</b></p> <input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Other: _____	<p><b>Race:</b></p> <input type="checkbox"/> White <input type="checkbox"/> African American <input type="checkbox"/> American Indian <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> Multi-racial
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**Program Interest**

<p>Do you own or work at a business associated with private water systems (i.e. well drilling, water treatment, etc.) - If yes, please describe the business.</p>
<p>Do you own a private water well, spring or cistern and depend on it for the water supply to your primary home, vacation home, or camp? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>Are you interested in (please select 1):</p> <input type="checkbox"/> Learning more about your own water quality, system construction, care and maintenance, and solving water problems and NOT serving as a volunteer with our volunteer program?  <input type="checkbox"/> Learning about your own water quality and system AND serving as a Well Owner Network Volunteer? Serving as a Well Owner Volunteer means that you will agree to have your contact information posted on our website, receive emailed questions from Virginia citizens, and assist local Extension agents as possible with conducting drinking water clinics and other outreach events.
<p>Would you prefer a face to face training workshop (about 8 hours) or a series of online modules? Note there may be a small charge for face-to-face training workshops.</p> <input type="checkbox"/> Face-to-face training workshop <input type="checkbox"/> Online training modules
<p>Volunteer agreement: I am volunteering my time to further the educational purposes of Virginia Cooperative Extension and will abide by the policies and procedures thereof. I will not discriminate on the basis of race, color, reed, religion, sex, national origin, handicap, or political affiliation.</p>
<p>Signature _____ Date _____</p>

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