



RESUME / APPLICATION TO VOLUNTEER OR CONTRACT WITH CHILDREN'S ACTIVITIES IN A U.S. ARMY CYS SETTING AT USAG ITALY



SSN: _____ **Prefix/Rank:** _____ **Name:** _____
(Last, First Middle (NOT INITIAL))

Maiden or Other Names Used: _____ **Postfix/Suffix:** _____

DOB: _____ **Birth Country:** _____ **State:** _____ **City:** _____

Work E-mail: _____ **Personal Email:** _____

Work #: _____ **Cell #:** _____

CMR _____ **Box** _____ **APO, AE Zip+4 (if known):** _____

Volunteer/Contract Position Applying for: _____

Two local references with email addresses:

(1)

(2)

Month & Year that YOU became affiliated with the military: _____ / _____
(born, married, or joined) **month & year**

If you are active duty then please enter your DOD ID # (back of CAC): _____

Sponsor's Prefix/Rank & full name: _____ **SSN:** _____

Please return completed application form to:

Abigail (Abi) E. Dewald

abigail.e.dewald.naf@mail.mil (encrypted)

Davis Hall, Building 108, Room 048 (Ederle)

0444-71-6967, 634-6967

****Please note that a background check with fingerprints is required to volunteer or contract with children's activities in a U.S. Army CYS setting.****