



INAFAMAOLEK CONCILIATION

P.O. Box 3267, Hagatna, Guam 96932

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E-mail: inafamaolekguam@gmail.com

VOLUNTEER APPLICATION

Contact Information:

1. _____
Name of Applicant _____ Social Security # _____
2. Mailing Address: _____
3. Telephone #: _____
Home _____ Work _____ Cell _____
4. Email Address: _____
5. What position (or type of work) are you seeking?
6. What is your understanding of the purpose of Inafa' Maolek?
7. How did you hear about Inafa' Maolek?
8. What makes you a good candidate for this position?
9. Briefly describe your work habits and your work ethics.
10. When (date) are you available? What times/days are you available? Do you have any responsibilities or scheduling conflicts that might interfere with Inafa' Maolek work?
11. Do you have a valid Guam driver's license? Do you have reliable transportation available to you at all times or part-time?
12. What is your educational background?