



SUN LAKES POSSE 501(c)(3)

9531 East Riggs Road
Sun Lakes, Arizona 85248-7412
(480) 895-8751 Fax: (480) 895-6691



Sun Lakes Community Posse Application

Name: _____ Phone Number: _____ Date: __/__/__

Address: _____

City, State Zip: _____

Email Address: _____

Months Available: Year round Seasonal from _____ to _____

Days Available:

Monday Tuesday Wednesday Thursday Friday Saturday Sunday

Times Available: 9:00 AM – Noon Noon – 4:00 PM Other: _____

Opportunities I'm Interested in:

- Medical Equipment Administration
- Medical Equipment Repair / Maintenance
- Office / Clerical
- Building Maintenance
- Yard Maintenance
- Other: _____

Describe any special skills / experience you have that will benefit the Sun Lakes Posse Office:

Office Use Only:

Follow-Up By: _____ Date: _____/_____/____

No longer interested Interview Date: _____/_____/____ Personal ID#: _____

Notes: _____
