

AREA 14 SERVICE COORDINATOR SERVICE RESUME
(APPOINTED) 2017-2018 Panel 67

Instructions: Complete and turn in to Chair-elect after October 2016 Elections. Thank you for your willingness to serve.

NAME: _____ SOBRIETY DATE _____

ADDRESS: _____

CITY/STATE/ZIP _____

PHONE NUMBER: _____ e-MAIL: _____

Check position(s) interested in:

Service Coordinator

Administrative Chair

___ Accessibilities

___ Finance

___ Archives

___ Website

___ Cooperation with Professional Community

___ Corrections

___ Grapevine

___ Intergroup

___ Literature

___ Public Information

___ Treatment

SERVICE HISTORY INFORMATION: (Continue on back)

WHY I WISH TO SERVE IN THIS CAPACITY: (Continue on back)