

*American Legion Auxiliary, Department of New York*

**American Legion Auxiliary College Staff Application Form**

Name \_\_\_\_\_

Unit Name and Number \_\_\_\_\_

County/District \_\_\_\_\_ / \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_ ZIP \_\_\_\_\_

Telephone (\_\_\_\_) \_\_\_\_\_

Email \_\_\_\_\_

Offices held in the American Legion Auxiliary:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Personal references (preferably American Legion Auxiliary members who are not related). Please provide name, telephone number and how you know this reference.

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Why do you feel you should be on the staff of the ALA College?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

---

**Submit application by December 1, 2011 to:** Linda Tome, 940 Alderman Road,  
Palmyra, NY 14522-9540