

Town of Dunstable  
Sr. Citizen Tax Work-Off Abatement  
511 Main Street  
Dunstable, MA 01827  
(978)649-4514 ext ~~228~~ 223

DEPARTMENTAL JOB REQUEST FORM

Department: \_\_\_\_\_

Supervisor: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Nature of Work (describe in detail):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date(s): Needed: \_\_\_\_\_

Time of Day: \_\_\_\_\_

Required Skills: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name of Volunteer that you prefer: \_\_\_\_\_

Comments: \_\_\_\_\_

Who will be responsible for training the volunteer and signing the time slip?

\_\_\_\_\_