



COUNTY OF ONSLOW

**Onslow County Health Department
2012 Onslow Community Health Assessment
Staff and Volunteer Survey Participation Interest**

Name: _____

Organization: _____

Mailing Address: _____

Email: _____

Phone (w): _____ (cell): _____

Dietary Needs (vegetarian, etc.): _____

Have you used a handheld computer (PDA) before? Yes No

Do you have a personal vehicle? Yes No

Availability:

___ Thursday March 29

___ Full Schedule: (8:00 A.M.-10:30 A.M.; Mandatory Training)
Survey 1:30 P.M. - 7:00 P.M.)

___ Note availability: _____

___ Friday , March 30

___ Full Schedule: (8:00 A.M.-10:00 A.M.; Staff/volunteer briefing)
Survey 10:00 A.M. – 7:00 P.M.)

___ Note availability: _____

___ Saturday, March 31

___ Full Schedule: (8:00 A.M.-10:00 A.M. Staff/volunteer briefing)
Survey 10:00 A.M. - 12:00 P.M.

___ Note availability: _____

Questions, please contact:

Sue Talbert; Health Promotions & Nutrition Director

Sue_Talbert@onslowcountync.gov

910-347-2154 ext. 3975

If you would like to volunteer, please send this form to Sue Talbert by one of the following methods.

Fax:

(910) 347-2789

Mail:

612 College Street
Jacksonville, NC 28540

PLEASE RSVP as soon as possible, or no later than:

**Wednesday
March 15, 2012**