



QUEEN'S LANDING CONDOMINIUM ASSOCIATION, INC.  
COMMITTEE VOLUNTEER RESUME

Name: \_\_\_\_\_

Property Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Telephone: Home: \_\_\_\_\_ Office/Cell: \_\_\_\_\_

Number of years as an owner at Queen's Landing: \_\_\_\_\_

Committee You Are Interested In: \_\_\_\_\_

Did you serve on this committee in the past year? \_\_\_\_\_

***If you answered the above question "yes" skip to the signature line and submit the form, otherwise, please complete the remainder of the form.***

Background and Experience: \_\_\_\_\_

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By signing below, I acknowledge that I have read, understand, and agree to abide by the provisions set forth in the Queen's Landing Committee Charter. I also understand that completing a form is not a guarantee that I will be added to the committee. Committee members are selected by the Committee Chair per the guidance of the Committee Charter in which knowledge/experience and availability to meet whether in person or via teleconference will be key consideration factors.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date