



Volunteer or Intern Application

PERSONAL INFORMATION:

First, Middle, & Last Name: _____

Street Address: _____

City, State, Zip Code: _____

Phone Number Cell: (____) _____ Home (____) _____

POSITION/AVAILABILITY:

Volunteer: _____

Intern: _____

Position Applied For (if known): _____

How Many Hours Can You Commit to: _____(Week) _____(Month)

Days/Hours Available (for volunteering in schools only, otherwise skip this):

Monday _____ Hours Available: from _____ to _____

Tuesday _____ Hours Available: from _____ to _____

Wednesday _____ Hours Available: from _____ to _____

Thursday _____ Hours Available: from _____ to _____

Friday _____ Hours Available: from _____ to _____

Availability (for all other types of volunteering – please indicate with an “x”):

- Weekdays _____
- Week Evenings/Nights _____
- Weekends _____

What date are you available to start volunteering or interning? _____

EDUCATION:

Name of School - Degree/Diploma or Certification (College Degree NOT Required):

Interests, Skills & Qualifications: (include training, licenses, awards): _____

EMPLOYMENT:

Present or Last Position: _____

Employer: _____

Address: _____

Position Title: From: _____ To: _____

Responsibilities: _____

Reason for Leaving: _____

I certify that information contained in this application is true and complete. I authorize the verification of any or all information listed above.

Signature _____

Date _____