



Volunteer Application

PERSONAL

Name _____ e-mail _____
Address _____ City _____ State _____ Zip _____
Home Phone _____ Cell Phone _____ Work Phone _____
Birthday ___/___/___ How would you like your nametag to read? _____
In case of emergency, please notify: _____ Phone number _____

EDUCATION

Please indicate highest level of education completed and degree obtained.

School	Degree	Major

How did you hear of our Volunteer Program? _____

REFERENCES

Please provide two personal references (non family members)

Name	Phone	Email
When would you like to volunteer? Tues _____ Wed _____ Thurs _____ Fri _____ Sat _____ Sun _____		
What time of the day is best? Morning _____ Afternoon _____ Evening _____ Specific Hours _____		
Generally, how many hours per week or month would you like to volunteer? _____		
Are you interested in on-going volunteer opportunities? _____		
Are you trying to fulfill your service learning requirements? _____		
If yes, what are those requirements? _____		

AREAS OF INTEREST

- | | |
|---|--|
| <input type="checkbox"/> Administrative Support | <input type="checkbox"/> Guest Services |
| <input type="checkbox"/> Outreach | <input type="checkbox"/> Public Relations |
| <input type="checkbox"/> Receptions | <input type="checkbox"/> Public Programs |
| <input type="checkbox"/> Animal Care | <input type="checkbox"/> Special Events/Programs |
| <input type="checkbox"/> Committee Work | |