

# Volunteer Application



## Contact Information

Name	
Street Address	
City, State ZIP Code	
Home Phone	
Work Phone	
E-Mail Address	

## Expertise

Tell us in which areas you are interested in volunteering

- |   |  |
|---|--|
| <input type="checkbox"/> Administration | <input type="checkbox"/> Community Service Massage |
| <input type="checkbox"/> Marketing      | <input type="checkbox"/> Newsletter production     |
| <input type="checkbox"/> Fundraising    | <input type="checkbox"/> Volunteer coordination    |
| <input type="checkbox"/> Grant Writing  | <input type="checkbox"/> Research                  |
| <input type="checkbox"/> Education      | <input type="checkbox"/> Finance                   |

## Qualifications

Please include your resume in the box below or email us a copy along with this form completed.

## Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

Name (printed)	
Signature	
Date	

## Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

Thank you for completing this application form and for your interest in volunteering with us.