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Volunteer Literacy Education

VALUE

Volunteering, Assisting, Loving, Understanding, Equipping

Volunteer Application

Date: _____ Email: _____

Name: _____
(First) (MI) (Last)

Address: _____
(Street) (Apt) (City/State) (Zip)

Home: (_____) _____ Work: (_____) _____ Cellular: (_____) _____

Employment History *(please list current employer and the previous employers in the past 5 years)*

Employer	City/State	Position	Dates of Employment	Reason for leaving

Education

	Name	City/State	Graduated? - Degree?	Major / Subjects of Study
High School				
College or University				
Other Education				

Volunteer History

Organization	City/State	Position	Dates Volunteered	Reason for leaving

Availability

Days of week I can serve: Mon Tue Wed Thurs Fri Max. Number of Days per week I can serve _____

Time of day I can serve: Morning Afternoon Other *(provide details below)* Max. Number of Hours per week I can serve _____

Church Affiliation: _____ City/State: _____

Pastor: _____ Phone: (_____) _____

Signature of Applicant: _____ Date signed: _____