

Walk2Learn International

"Changing Lives Through Education."



Volunteer Application Form

Contact Information

Name	
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female
Street Address	
City ST ZIP Code	
Home Phone	
Mobile Phone	
E-Mail Address	

Occupation

Type of Occupation:

Student Working Professional, please state profession: _____

School of Attendance : _____

Level of education : _____

Availability

During which hours are you available for volunteer assignments?

Monday Tuesday Wednesday Thursday Friday Saturday

How long would you like to volunteer with W2LI?

0-3 months 3-6 months 6-12 months 12-18 months 18-24 Months

Interests

Tell us in which areas you are interested in volunteering

Administration Events Community Outreach Grant Writing Advocacy

Fundraising Social Media & Communications Reading, Math & Science Club Other

If other, please specify _____

Why do you want to volunteer with W2LI?

Disability

Do you have any disabilities?

Yes No

If yes, what accommodation would you need to do this volunteer position?

Special Skills or Qualifications

Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports.

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Previous Volunteer Experience

Do you have prior volunteer experience in any other nonprofit organization?

Yes No

Summarize your previous volunteer experience.

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Person to Notify in Case of Emergency

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

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.