

# Volunteer Application

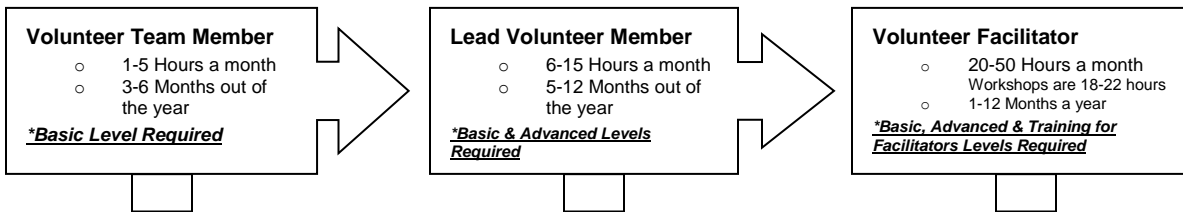
Alternatives to Violence Project



## Contact Information

Name	
Street Address	
City ST ZIP Code	
Main Phone	
Alternate Phone	
E-Mail Address	
Your Preferred Method of Contact?	

## Please Select Your Level of Volunteer Interest at this time



## Availability

During which hours are you available for volunteer assignments?

- Weekday mornings       Weekend mornings       Try Me ANYTIME  
 Weekday afternoons       Weekend afternoons  
 Weekday evenings       Weekend evenings

## Interests

Tell us in which areas you are interested in volunteering

- Administration – Data Entry, Workshop Reporting, Preparing Info Packets, Making Copies...  
 Events – Transporting/set-up of Table/Chairs/Banners, Recruiting and offering info at Table  
 Field work – Work with Outreach Coordinator to attend mtgs, do mini presentations, represent AVP  
 Fundraising – Have knowledge or experience in fundraising, or a desire to learn  
 Deliveries – AVP Booth material or Pick up and Drop off food for workshop lunches  
 Make Phone Calls – Work with Registrar to confirm workshop registrants and make reminder calls.  
 Newsletter production – Write articles, Interview Participants and Volunteers, Take Pictures  
 Volunteer coordination – Logistics, Emails, Calls, Arranging Transportation, Answering Questions  
 Become a Workshop Facilitator – Either in the community, with youth or in a prison  
 Social Media, Digital Marketing, Graphic Design  
 Other \_\_\_\_\_

### 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

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.