



Intern/Volunteer Information Form

General Information

Date: _____ Date of Birth: _____

Name: _____

Cell/ Home Phone: _____ Email: _____

Address: _____

Education Information

High School Students: High School Name: _____

Grade Level: _____

College Students: College name: _____

College Grade Level: _____ Major: _____

Clubs/Organizations: _____

Availability (please circle all that apply)

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning	Morning	Morning	Morning	Morning	Morning	Morning
Afternoon	Afternoon	Afternoon	Afternoon	Afternoon	Afternoon	Afternoon
Evening	Evening	Evening	Evening	Evening	Evening	Evening

Total # of hours you seek to complete: _____ # Hours _____ Due Date

• Over •



Interests & Skills

Please check the volunteer area(s) you are interested in:

- Media Cultural Arts - Events Writing Photography Translating Proofreading
- Event Planning/Coordinating Youth Development Graphic Design/Art
- Wordpress Web Design

Please list any computer skills that you possess: _____

Emergency Contacts

Name: _____

Name: _____

Relation: _____

Relation: _____

Cell/Home Phone: _____

Cell/Home Phone: _____

Do you have any allergies or medical conditions that you would want a doctor or paramedic to know about? _____

Do you have any dietary restrictions/preferences? _____

Do you have any special needs you would like for us to know about? _____

What are your preferred pronouns? _____

I commit to completing the hours that I have agreed to, in good faith and to the best of my ability:

Name (Print): _____

Date: _____

Signature: _____