

## Volunteer Application



<b>Name:</b>	
<b>Address:</b>	
<b>City ,State, Zip Code:</b>	
<b>Phone:</b>	<b>Email:</b>

### Education

High School:	Degree:
College:	Degree:
Graduate Study:	Degree:

### Experience/Interests

Who is your current employer?  
Position:  
Please list your past work experience(places, dates, positions held):

Please list any special skills, hobbies or training (languages, computer skills, etc.):

Do you have experience working with children, or are you interested in working with children?

What interests you about volunteering at the ICA?

Are you looking for a short or a long term volunteer commitment?

### Emergency/Medical

Please list any medical requirements and/or allergies:

Emergency Contact Person

Name:

Relation:

Phone:

### References

Please give the name, address, and phone or email for two references we can contact:

Are you a member of the ICA?

How did you learn about volunteer opportunities at the ICA?

### Availability

Please indicate when you would most likely be available to volunteer

	<b>Weekdays</b>	<b>Weekends</b>
<b>Mornings</b>		
<b>Afternoons</b>		
<b>Evenings</b>		