



VOLUNTEER APPLICATION

The information you provide in this application is for internal purposes and will be kept confidential. This is not an application for employment but an application to become a volunteer at the United States Fund for UNICEF. You may also submit a resume.

PERSONAL INFORMATION

First Name: _____ Last Name: _____ MI: _____

Address: _____ Apt No. _____

City: _____ State: _____ Zip-code: _____

Home Phone: _____ - _____ - _____ Cell Phone: _____ - _____ - _____

E-Mail Address: _____ Best time to contact you _____

Occupational Information (If retired or unemployed, please indicate last employment)

Current Occupation: _____ Name of Employer: _____

Address: _____ Dates of Employment: _____ to _____

City: _____ State: _____ Zip-code: _____

Educational Information (providing the following information is optional)

High School: _____ Diploma: YES NO

College/University: _____ Degree(s): _____

Technical Training/other: _____ Certification(s): _____

VOLUNTEER PLACEMENT

Volunteer Experience

Organization	Year	Position/Duties
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_____	_____	_____
_____	_____	_____

How did you hear about U.S. Fund for UNICEF Volunteer Opportunities?

Language Skills other than English (please include level of fluency)

What Type(s) of Volunteer Service interests you?

____ Data Entry / Typing ____ General Clerical Work
____ Internet Research ____ Special Events
____ Speaking to youth groups or organizations ____ Speaking to adult groups or organizations
____ Other (please specify: _____)

Availability Dates and Hours (Please check all that apply):

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning							
Afternoon							
Evening							

REFERENCES

Professional/Academic References (Supervisor or colleague):

1. First Name: _____ Last Name: _____ MI: _____

Address: _____ Apt No. _____

City: _____ State: _____ Zip-code: _____

Home Phone: _____ - _____ - _____ E-Mail Address: _____

2. First Name: _____ Last Name: _____ MI: _____

Address: _____ Apt No. _____

City: _____ State: _____ Zip-code: _____

Home Phone: _____ - _____ - _____ E-Mail Address: _____

PLEASE READ AND SIGN THE REMAINDER OF THIS FORM

In the selection of volunteers, there shall be no discrimination against an otherwise qualified individual on the basis of race, color, ethnicity, sex, religion, creed, national origin, age, or disability, marital status, veteran status, or any other category protected by law.

I hereby authorize you to check all my educational and professional references. I further authorize these reference to release to you any information needed.

Signature: _____ **Date:** _____