

Volunteer Application



Thank you for considering EWOC as a place to donate your time and talents. Volunteers are vital to EWOC and the women we serve. To help us learn about your experience, abilities, and interests, please complete this Volunteer Application as thoroughly as possible.

Contact Information

Name			
Street Address			
City ST ZIP Code			
Home Phone		Email Address	
Work Phone		Cell Phone	

Availability

During which hours are you available for volunteer assignments?

Monday:

Thursday:

Tuesday:

Friday:

Wednesday:

Saturday:

Interests

Tell us in which areas you are interested in volunteering

I want to help with reception, phones, mail and administrative tasks.

I want to help with event planning and coordination.

I want to work directly with Women in Transition as a Volunteer Counselor

I want to help with fundraising activities

I want to help with Volunteer recruitment and coordination

Special Skills or Qualifications

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

Previous Volunteer Experience

Summarize your previous volunteer experience.

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Other Interests:

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Person to Notify in Case of Emergency

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

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete.

Name (printed)	
Signature	
Date	

Please mail to: Everywoman Opportunity Center, Inc. 237 Main Street, Suite 330 Buffalo NY 14203	Or fax to: 716-847-1550	For more information, contact: Marsha Koelmel 716-847-1120 x209 mkoelmel@everywoman.org
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