

For ALC Use Only:

_____/_____/_____
Semester Year Instructor

Today's date: _____

The Adult Learning Center Volunteer Information Form

CONTACT INFORMATION

Name _____ Birth date _____

Local Address _____ City _____ Zip code _____

Primary phone number _____ Secondary phone number _____

Email address _____ Preferred method of contact: Phone Email Mail

Gender: Male Female Marital Status: Single Married Separated Divorced Widowed

Emergency Contact _____ Relationship _____ Phone _____

Volunteer's present occupation & employer* _____

*Can be past occupation & employer if retired

Parish/ Church affiliation _____

Are you a service learner? ___ Yes ___ No If yes, what school? ___ Marquette ___ UWM Other: _____

Please list any service or civic clubs in which you are involved (e.g. Rotary, Kiwanis, Junior League, Lions, etc.)

Education & Special Skills/Training _____

VOLUNTEER PREFERENCES

Volunteer Areas of Interest ___ math ___ science ___ social studies ___ language arts

___ job readiness skills ___ office/clerical work

Would you be interested in teaching a skill? Which one? _____

Which days are you able to volunteer? ___ Monday ___ Tuesday ___ Wednesday ___ Thursday

When would you like to volunteer? ___ Mornings (9am-12pm) ___ Afternoons (4pm-6:30pm)

Tutoring level preference: ___ Adult Basic Education/Level 1 ___ Pre-GED/Level II ___ GED/Level III

How did you learn about us? _____

Why are you volunteering? _____

Any comments? _____

I am a ___ new or ___ returning volunteer. I began volunteering at the ALC in _____ (year).

If returning: I tutor in _____'s room.