

The Adult Learning Center Volunteer Information Form

CONTACT INFORMATION

Name _____ Birth date _____

Address _____ City _____ Zip code _____

Home phone number _____ Secondary phone number _____

Email address _____ Preferred method of contact: phone email mail

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

Ethnicity: Hispanic African American White Native American Asian Other

Emergency Contact/Relationship _____ Phone number _____

Volunteer's present occupation & employer _____

Volunteer's past employer _____

Spouse's present occupation & employer _____

Spouse's past employer _____

Parish/ Church affiliation _____

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-12noon) _____ Afternoons (4pm-6:30pm)

Tutoring level preference: _____ Adult Basic Education/ Level I _____ Pre-GED/ Level II _____ GED/ Level III

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

If returning: I tutor in _____'s room.

How did you learn about us? _____ Comments _____