



Accredited Affiliate

LITERACY VOLUNTEERS, VALLEY SHORE-CT, INC

Volunteer Application / Information Form

Personal Information

First Name: Last Name: Date: Street Address: City: Zip: Phone: Emergency Contact Name and Phone: Email Address:

Gender: Male Female Date of Birth: Month Date Year Employment Status: Full Time Part Time Retired Unemployed Homemaker Student

Race: American Indian/Alaskan Native Asian/Pacific Islander Black - Not Hispanic Hispanic White - Not Hispanic

Education: Occupation (prior to retirement as well): Employer (prior to retirement as well): Address: Phone:

Organizations currently active in: Teaching/tutoring experience: Volunteer experience: Hobbies and interests:

Skills: Interviewing Writing Computer Typing Artistic (specify)

Availability

Times Available to Tutor or Volunteer: Morning Afternoon Evening Weekends Hours available for an informal discussion about LVVS:

Questionnaire

How did you learn about Literacy Volunteers? What is your motivation to coming to Literacy Volunteers? What particular aspect of our program brought you to Literacy Volunteers? Are you willing to serve on one of our Volunteer Committees? Is volunteer work a requirement for school or job credit? Teaching preference: Adult Youth Male Female Any Can you commit yourself to tutor for one year, two hours per week? Yes No

Office Use

Start Date: BR/ESL Certification Date: Primary Role: Tutor Volunteer (non-tutoring) Volunteer (tutoring) Workshop Leader (non-tutoring) Workshop Leader (tutoring) Board Member (non-tutoring) Board Member (tutoring) Secondary Role: Tutor Volunteer (non-tutoring) Volunteer (tutoring) Workshop Leader (non-tutoring) Workshop Leader (tutoring) Board Member (non-tutoring) Board Member (tutoring)