

Volunteer Form

Contact Information

Name: _____ Current Employer: _____

Address: _____

Day Time Phone () _____ Cell Phone () _____ Email: _____

Availability & Volunteer Opportunities

	Monday	Tuesday	Wednesday	Thursday
9:00 a.m.—1:00 p.m.				
1:00 p.m.—5:00 p.m.				

Available Start Date: _____

Special Skills & Qualifications

Volunteer position(s) you are applying for:

- | | | | |
|--|--|---|---------------------------------------|
| <input type="checkbox"/> Accounting | <input type="checkbox"/> Law School Externship | <input type="checkbox"/> Private Investigator | <input type="checkbox"/> Translator |
| <input type="checkbox"/> Administrative/Clerical | <input type="checkbox"/> Law School Internship | <input type="checkbox"/> Special Events | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Court Reporter | <input type="checkbox"/> Paralegal Assistance | <input type="checkbox"/> Teaching/Mentoring | |

Highest level of education: _____ Special Certifications: _____

Are you bilingual? No Yes If yes, please indicate which language you are fluent in: _____

Please describe any training, experience or skills you have that you will be able to contribute as a volunteer:

List other organizations you have volunteered for: _____

I understand that I am applying to be an unpaid volunteer for Legal Aid of Manasota, Inc. and that this is not an application for employment. If accepted to the volunteer program, I agree that I will abide by the requirements, policies and procedures of Legal Aid. I understand that if any misrepresentations have been made by me, I may be disqualified for consideration or dismissed.

Volunteer Signature

Date