Information Technology Thought Leaders

VOLUNTEER APPLICATION FORM

Name: _____

Address: _____

Phone: _____

E-mail: _____

Check the volunteer work you are interested in doing (check all that apply):

❑ Computer Trainer	❑ Mentors	❑ Career Development
❑ Communications	❑ Fundraising	❑ Corporate Champions
❑ Membership Recruitment/Retention	❑ Newsletter development	❑ Strategic Alliance Liaisons
❑ Awards Committee	❑ Chapter Building Workshop Focus Group	❑ Education Banquet Committee
❑ Fundraising	❑ Marketing	❑ Member Benefits
❑ Outreach	❑ Volunteer Coordinator	❑ Web Developer

❑ I want to know more about my options

Are you interested in working:
❑ Independently at the library
❑ On community events
❑ At Home
❑ With the public

Available hours:

❑ Morning	❑ Afternoon	❑ Evenings	❑ Weekends	❑ Special Events

How often would you like to volunteer?

❑ Regularly. How many hours per week? _____

❑ Periodically. How many hours per month? _____

❑ Work on a one-time or short-term project.

Do you speak a language other than English?

❑ Yes (Please specify): _____
❑ No

Employment or volunteer history: _____
_____
_____
_____
_____
_____

References: _____
_____
_____
_____
_____