



Volunteer Form

Date:

Name:

Address:

City:

State:

Zip Code:

Phone:

Email:

Program requested to volunteer:

Hours Available to Volunteer

Monday:

Tuesday:

Wednesday:

Thursday:

Friday:

Saturday:

Sunday:

(Weekends are rare)

When are you available to begin volunteering?

Education

Type of School	School Name and Address	Years Completed	Major or Degree
High School			
College			
Professional School			
Other			

Have you ever been convicted of a crime: No Yes If 'yes' please explain:

Do you have a driver's license? No Yes State of issue:

Please List 2 references other than relatives and previous employers

Name	
Work Title	
Relation to You	
Telephone	

Please either cut and paste your resume below or **share some of your prior work and/or volunteer experiences** with us that may apply to your interest in volunteering at Youth for Change.

You can submit the downloaded document directly to us using one of the following options:

1. Attach a copy of this document to an email and send it to aheinrichs@youth4change.org
2. Fax the document to 530-877-3020 "ATTN: Angela Heinrichs"

Thank you for your interest in volunteering with Youth for Change!