WESTCHESTER COMMUNITY COLLEGE

APPLICATION FOR VOLUNTEER SERVICE

Date: ______________

NAME________________________________________ (Title: Mr./Mrs./Ms./Dr.)________

ADDRESS___________________________________________________

CITY___________________________STATE_______________________ZIP_____________________

HOME PHONE___________CELL PHONE___________WORK PHONE_____________

E-MAIL ADDRESS: __________________________________________________________

EMERGENCY CONTACT # AND NAME______________________________________________

TIME AVAILABLE? (Days of Week and Hours) _________________________________

EDUCATION: High School ________________________________________________

College________________________________________ Major___________

Graduate School________________________ Major___________

WORK AND VOLUNTEER HISTORY: (Attach resume if you wish)

______________________________________________________________________________

COMPUTER LITERACY: (Word Processing and Other Applications)

______________________________________________________________________________

HOBBIES/SPECIAL INTERESTS/SKILLS:______________________________________________

______________________________________________________________________________

REFERRED BY______________________________________________

DO YOU KNOW ANYONE AFFILIATED WITH WCC?_________________________________

REFERENCES: (Please list the names and phones numbers of 2 references other than family members)

______________________________________________________________________________

HAVE YOU EVER BEEN CONVICTED OF A CRIMINAL OFFENSE OTHER THAN A MINOR TRAFFIC
VIOLATION? _______ IF YES, PLEASE EXPLAIN_____________________________________________

DO YOU HAVE A VALID DRIVER'S LICENSE? YES________ NO________

Please return to Volunteer Office, WCC GATEWAY BLDG, ROOM S231

revised 07/14