

History Within Reach

## **APPLICATION FOR VOLUNTEER SERVICE**

Name: (Mr., Ms., Dr	:.,)							
Address:								
City:	Zip:							
Birthday (optional)								
Home Phone:	Work					Phone:		
e-mail:								
Employment Status:	Fu	ll time:						
	Par	t-time:						
Education (indicated							igh school; GED; associate	
degree; bachelor de	gree; n	naster's	degree	: Ph.D.;	other			
List volunteer exper	iences:							
Please state briefly v	vhy you	ı would	like to	become	a SCH	[S volu	inteer:	
List your volunteer i	nterests	s: (offic	e, gard	en, tour	guide,	etc.) _		
Please check your av	vailabil	ity for v	oluntee	ering:				
	Sun	Mon	Tue	Wed	Thr	Fri	Sat	
Morning								
Afternoon								
Evening								
Please give the name	e and pl	none nu	mber of	f someo	ne we c	an not	ify in case of an emergency	
Name:					Phon	Phone:		
Today's Date:								