

**Volunteer Application**

Please complete both sides of this application.

First name \_\_\_\_\_ Last name \_\_\_\_\_ MI \_\_\_\_\_

Address: \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Best ways to contact me (please check and complete all that apply):

Phone: \_\_\_\_\_  Work phone: \_\_\_\_\_

E-mail: \_\_\_\_\_ Other: \_\_\_\_\_

What volunteer opportunities interest you?

- Tutoring a learner in a one-to-one match
- Tutoring at a drop-in site or in a small group setting
- Tutoring adult learners in basic computer skills (MS Office, e-mail, Internet use, tablets)
- Working with young learners in:  Early Childhood  K-4  5-8  9-12
- Sharing workplace, hobby, or other skills with learners: \_\_\_\_\_
- Providing "office" support (taking phone messages, data entry, etc.)
- Working with **Family Literacy Saturdays**  Assisting with special events or public relations
- Offering leadership or other skills: \_\_\_\_\_

When are you available?

Mornings from \_\_\_\_\_ to \_\_\_\_\_ M T W TH F

Afternoons from \_\_\_\_\_ to \_\_\_\_\_ M T W TH F

Evenings from \_\_\_\_\_ to \_\_\_\_\_ M T W TH F

Weekends (please indicate times):

My schedule varies: \_\_\_\_\_

Please list any languages you speak fluently: \_\_\_\_\_

Please list any special skills or interests you would be willing to share with learners and/or staff:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Emergency contact information:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_ Other means of contact: \_\_\_\_\_

Address: \_\_\_\_\_

We will provide reasonable accommodations with advance notice from volunteers who need accommodations. The volunteer is responsible for requesting these.

Accommodation request: \_\_\_\_\_

Is this volunteer experience fulfilling an academic or work requirement?  Yes  No

(We are **not** a sentence to service agency. We cannot provide placement for court-ordered community service.)

If yes, please explain this requirement: \_\_\_\_\_

Current employment or volunteer commitments (if applicable):

Employer/Volunteer Site: \_\_\_\_\_ Phone number: \_\_\_\_\_

Position and/or responsibilities: \_\_\_\_\_

References – Please list two people who know you well and are not family members. This could include employers, supervisors or colleagues at other volunteer positions, or clergy members.

1<sup>st</sup> Reference name: \_\_\_\_\_ Phone number: \_\_\_\_\_

Relationship to you: \_\_\_\_\_

2<sup>nd</sup> Reference name: \_\_\_\_\_ Phone number: \_\_\_\_\_

Relationship to you: \_\_\_\_\_

By signing below, you agree to follow the policies and guidelines of *LITERACY VOLUNTEERS OF SOUTHWEST MINNESOTA*. You agree to participate in orientation and training that is appropriate to your tutoring or other volunteer assignment. You understand that submitting this application does not guarantee your placement as a volunteer. You certify that the information you have provided is up-to-date and accurate. You give the Volunteer Coordinator permission to contact your references.

Direct service placements with learners require you to complete a Disclosure and Release of Information Form (Criminal Background Check). This is done for the safety of other volunteers, learners and/or staff members. Any fees for this process will be at the volunteer's expense unless this creates a financial hardship. If this is the case, we can assist with part or all of this fee.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Thank you for applying to be a volunteer. We will contact you within one week of receipt of your application to provide additional information and to schedule an interview and orientation. Orientation and volunteer training are required. We will try to schedule training at times that are convenient for our volunteers. Please call us at 507-401-7337 or e-mail us at [literacy.swmn@gmail.com](mailto:literacy.swmn@gmail.com) if you have any questions.