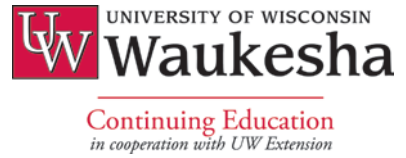


UW-Waukesha Continuing Education Volunteer Application



Contact Information

Name		
Street Address		
City		
State/Zip Code		
Home Phone		
E-Mail Address		

Availability

During which hours are you available for volunteer assignments?

- Weekdays: 8:00am - 12:00pm Weekends: 8:00am - 12:00pm
 Weekdays: 12:00pm - 4:00pm Weekends: 12:00pm - 4:00pm
 Weekdays: 4:00pm - 8:00pm Weekends: 4:00pm - 8:00pm

Interests

Tell us in which areas you are interested in volunteering

- Administration
 Special Events
 Registration
 Communications/Marketing

Special Skills or Qualifications

Please summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports.

Previous Volunteer Experience

Please summarize your previous volunteer experience.

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Emergency Contact Information

Name	
Relationship	
Home Phone	
Cell Phone	
Name	
Relationship	
Home Phone	
Cell Phone	

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my dismissal.

Name (printed)	
Signature	
Date	

Our Policy

It is the policy of UW-Waukesha Continuing Education to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

Thank you for completing this application form and for your interest in volunteering with us.