



International Institute Rhode Island

**645 Elmwood Avenue
Providence, RI 02907**

Volunteer Application

This application will help us understand more about your interests and qualifications for specific volunteer opportunities. Please fill out this form completely and return it to the address listed on page 2. Thank you for your interest in our organization!

Name: _____ **Date:** _____

Street Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone number (home): _____ **Phone number (work):** _____

Other Phone: _____ **Email:** _____

Emergency Contact Name and phone number: _____

Your Occupation: _____

If employed, current employer: _____

EDUCATION AND TRAINING: (Indicate highest completed)

HIGH SCHOOL 1 2 3 4

COLLEGE 1 2 3 4 Area of concentration: _____

GRADUATE MASTERS Ph.D. Area of concentration: _____

Languages Spoken: _____

(please indicate fluency level and whether language skills are oral or written)

VOLUNTEER AVAILABILITY (please check all that apply)

Monday	Morning___	Afternoon___	Evening___
Tuesday	Morning___	Afternoon___	Evening___
Wednesday	Morning___	Afternoon___	Evening___
Thursday	Morning___	Afternoon___	Evening___
Friday	Morning___	Afternoon___	Evening___
Saturday	Morning___	Afternoon___	Evening___

Date you are available to begin volunteering: _____

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INTERESTS

List your special interests, hobbies, training or skills that you have (including computer skills):

Please describe why you are interested in volunteering for our agency: _____

Do you have a police or court record, other than minor parking violations? If yes, please explain:

How did you hear about the International Institute? _____

We have many types of volunteer opportunities. Please visit our web site at <http://www.iiri.org/volop.html> and review the information on these roles. During the volunteer orientation and interview, you will have an opportunity to discuss the specific volunteer role that is right for you. If you already have a specific role in mind, please note it here: _____

I certify that the information on this application is correct. I agree to attend a volunteer intake/orientation session at the International Institute as part of this application process.

Signature

_____ Check here to begin receiving IIRI's biweekly E-Newsletter, with information on upcoming events, activities, client success stories, immigration reform, and more.

Please return this Volunteer Application form to: Cindy Mauch, Associate Director, 645 Elmwood Avenue, Providence, RI 02907, or fax to 401.467.6530 or email to cmauch@iiri.org.

This volunteer program is offered on a non-discriminatory basis.