

Internship/Volunteer Application



BCL of Texas
Business & Community Leaders

Contact Information

Name	
Street Address	
City, ST Zip Code	
Home Phone	
Cell Phone	
E-Mail Address	

Availability

During which hours are you available for volunteer assignments?

Must be between the hours of 8am-5pm

Weekday mornings Days _____ Hours _____

Weekday afternoons Days _____ Hours _____

Weekday evenings Days _____ Hours _____

Interests

Tell us in which areas you are interested in volunteering

- Administration
- Web Development
- Events
- Direct Services
- Fundraising
- Data Entry
- Outreach Education
- Newsletter production
- Resource Development

Special Skills or Qualifications

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

Previous Volunteer Experience

Summarize your previous volunteer experience.

--

Person to Notify in Case of Emergency

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone	
E-Mail Address	

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 immediate dismissal.

Name (printed)	
Signature	
Date	

Our Policy

It is the policy of this organization 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.

Submissions

If you have any questions please call 512.383.0025 or email Raquel Valdez.

Please submit the application along with a resume by email or fax to:

Attn: Raquel Valdez, Director of Corporate Strategies
512.610.2568 (fax), rvaldez@bcloftexas.org