



college forward

Volunteer Application

CONTACT INFORMATION

Name: _____

Street Address: _____

City/State/Zip Code: _____

Home Phone: _____

Cell Phone: _____

Email Address: _____

Emergency Contact: _____

Preferred Method of Contact: Home Phone Cell Phone Email

How did you hear about College Forward? _____

VOLUNTEER INFORMATION

Employed? Full Time Part Time N/A

Current Employer: _____ Position/Title: _____

Attending School? Full Time Part Time N/A

Name of School: _____ Area of Study: _____

Please indicate previous Professional (P) and Volunteer (V) experiences:

Organization/Company Name	P/V	Your Role	Start/End Dates



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VOLUNTEER PREFERENCES

Why are you interested in volunteering with College Forward? _____

How often would you like to volunteer? Daily Weekly Monthly Specific Events

When would you prefer to volunteer? Morning Afternoon Evening
 Mon Tues Wed Thurs Fri Sat Sun

Please check all areas in which you would be interested in volunteering:

- | | |
|---|---|
| <input type="checkbox"/> General Office/Admin | <input type="checkbox"/> Video Production |
| <input type="checkbox"/> Finance/Accounting | <input type="checkbox"/> Public Relations/Outreach |
| <input type="checkbox"/> Bulk Mailings | <input type="checkbox"/> Research/Evaluation |
| <input type="checkbox"/> Graphic Design | <input type="checkbox"/> Fundraising Events |
| <input type="checkbox"/> IT Support | <input type="checkbox"/> Student Events |
| <input type="checkbox"/> Web Site Development | <input type="checkbox"/> Translation/Interpretation |
| <input type="checkbox"/> Legal Services/Pro Bono Legal Aid | <input type="checkbox"/> Writing/Editing |
| <input type="checkbox"/> Photography | <input type="checkbox"/> Craft/Beautification Projects |
| <input type="checkbox"/> Community Service Event Help | <input type="checkbox"/> Other: _____ |

CONFIDENTIALITY & PHOTO RELEASE

College Forward works with confidential information, including student and family records, team member files, donor and grantor information, and sensitive financial documents. Confidential information also includes anything related to College Forward's unique business, products, or services which are conceived, made, developed, or acquired by team members during their time at College Forward. We are legally responsible for safeguarding the information we collect in our program. It is the responsibility of every volunteer to refrain at all times from discussing and/or making any unauthorized disclosure of College Forward's confidential information, especially student and family information, to anyone outside of the organization. The only exceptions are representatives of a student's high school counseling office, and a student's parent(s) or legal guardian(s).

_____ I consent and agree that College Forward has the right to take photographs, videotape, or digital
(initials) recordings of me and to use these in any and all media, now or hereafter known, and exclusively for the purpose of College Forward.

AGREEMENT & SIGNATURE

By submitting this application, I affirm that the facts set forth in it are true and complete to the best of my knowledge. I understand that misrepresentations or omissions may be cause for my immediate rejection as an applicant for a volunteer position with College Forward. By signing below I agree to the confidentiality statement above and understand that failing to maintain confidentiality, as described above, especially something that endangers College Forward's students or families, may result in legal action by College Forward.

Signature: _____ Date: _____