



OMYDC VOLUNTEER APPLICATION

Date of Application: _____

Name:	First	Initial	Last
Address:			
Are you a student?		Where?	
Are you currently employed?		Occupation:	
Home#:		Area of Study:	
Cell#:		Email:	
Emergency Contact Information:			
> Name: > Address / Phone number: > Relationship to volunteer:			
Interests: (Circle each interest)			
Tutoring / Mentoring Afterschool Fundraising Events Facility Work Gardening Work			
Please list the time frames you are available to work/volunteer after school or on weekends.			
> Monday	Start	End	> Friday
> Tuesday	Start	End	> Saturday
> Wednesday	Start	End	> Sunday
> Thursday	Start	End	
List Any Previous or Current Volunteer Experience:			
1.	2.	3.	
Print Name:	Signature	Date	