Girls Inc. of Meriden and Central CT High School Volunteer Application (Under 18)



General Information

First & Last Name:			
Date of Birth:			
Mailing Address:			
City:			
State:		ZIP Code:	
Phone:			
Email:			
Spoken Languages: (Please select all that a	oply)		
□ English □ Spanish □ Other			
General Information, H	obbies, Interests, etc.:		
Parent/Guardian Name (First and Last)			
Parent/Guardian Phone	:		
Do you have available t Yes No Unsure	ransportation for volunte	eer commitments	?

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Education

School Attending:							
Current Grade:							
Guidance Counselor Name:							
Please list any clubs or activities you have previously been or are currently involved in:							
Experience/Affiliation History							
Previous describe your previous Volunteer/Work Experience, if any:							
D	/						
Past or present affiliations/memberships (Ex. National Honor Society, etc.):							
Are you a current or past Girls Inc. member?							
□ Yes □ No							
If yes, please indicate (Select all that apply) Girls Inc. of Mer	the affiliate(s) where you were involved in programs:						

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Accommodations

Are you in Yes No	need of any	/ accommo	dations?					
If yes, pleas	se detail:							
Availability	,							
Please specify the frequency of your volunteer availability: One time only Weekly Bi-weekly Monthly As needed								
Please specify the days of your volunteer availability:								
	Monday	-	Wednesday		Friday	Weekend		
Morning								
Afternoon								
Evening								
Agreement and Signature								
I hereby agree to become a volunteer member with Girls Inc. of Meriden and Central Connecticut.								
Signature: Date:								
Parent Signature: Date:								