Accelerating Nonprofit Success

Volunteer/Internship Application Form.

Full Name: _____ **Date:** _____

Last *First* *M.I.*

Address: _____

Street Address *Apartment/Unit #*

_____

City *State* *Zip Code*

Phone: (_____) _____ **E-mail Address:** _____

Are you 16 years or older? ☐ Yes ☐ No

Occupation: _____

Employer/ Position Supervisor Name

Supervisor Email: _____ **Phone:** _____

Education: _____

University/School Name Level Completed Major GPA

Please indicate which opportunity interests you: ☐ Volunteering ☐ Internship

*Note: Internships are for students enrolled in an accredited academic program who receive school credit for the internship, or participants in a program approved by a public agency for licensure training.

Please indicate your interest areas. Check all that apply:

☐ Administrative Support**
☐ Web Design
☐ Accounting / Finance
☐ Court Referral Program
☐ Other: _____
☐ Development / Marketing
☐ Human Resources
☐ Fundraising / Sales Client Services
☐ Training
☐ Volunteer Services

**This is a volunteer opportunity only.

When are you willing to volunteer? (days of week and times):

☐Monday ☐Tuesday ☐Wednesday ☐Thursday ☐Friday

_____ _____ _____ _____ _____

Anticipated Intern/ Volunteer Start Date: _____ **End date (If applicable):** _____

Please list three references:

1. _____
Name Position Relationship

_____
Organization Name/ Address

_____
Phone Number Email

2. _____
Name Position Relationship

_____
Organization Name/ Address

_____
Phone Number Email

3. _____
Name Position Relationship

_____
Organization Name/ Address

_____
Phone Number Email

I certify that the information contained on this form is true and complete to the best of my knowledge.

Signature: _____ **Date:** _____

OneOC is an Equal Opportunity Employer. All qualified applicants will receive consideration for an Internship without regard to race, color, sex, age, national origin, religion, disability, veteran status, sexual orientation, marital status, citizenship, or any other protected status.