



YWCA SAN GABRIEL VALLEY
 943 North Grand Avenue, Covina, CA 91724
 Tel: 626.960.2995 • Fax: 626.814.0447 • www.ywcasgv.org

SENIOR SERVICES
 YWCA Intervale
 24-Hour Message Line: 626.214.9465

DOMESTIC VIOLENCE
 YWCA WINGS
 24-Hour Help Line: 626.967.0658

Volunteer/Internship Application

Date: _____

Full Name: _____

Phone Number: _____

Home Address: _____

Email: _____

Secondary Email: _____

Current Employer/Title: _____

Are you currently an employee of the YWCA SGV, (circle one) yes or no

Note: If yes, please notify your supervisor that you intend to also be a volunteer for the YWCA.

Interested in:

Internship/Independent Study (Specify field of study): _____

Currently: High school Student Undergraduate Student Graduate Student Post-Graduate

School/University Name: _____ Is this a required Internship: (circle one) yes or no

Volunteer

Area of Interest:

Special Events

Fund Development

Outreach and Education

Communication and Marketing

Senior Services/Meals on Wheels

YWCA-WINGS Domestic Violence services

Other (Please specify): _____

Highest Level of Education Obtained:

High School

College

Graduate School

Vocational

Other (specify): _____

Time Commitment:

___ x week

___ x month

Seasonal (Specify): _____

once per year

Other (Specify): _____

Availability:

	Sun	M	T	W	Th	Fr	Sat
Hours Available							

Please list three references that we may contact:

Name: _____ Email: _____

Phone: _____ Relationship to Applicant: _____

Name: _____ Email: _____

Phone: _____ Relationship to Applicant: _____

Name: _____ Email: _____

Phone: _____ Relationship to Applicant: _____

Bilingual? (circle one) Yes or No

If yes, what language(s) _____

Special training, skills or interests:

Where did you hear about YWCA-SGV and our volunteer opportunities? *(select all that apply)*

- Word of Mouth
- Health Fair
- School event
- YWCA Website/Facebook
- YWCA-WINGS Domestic Violence services
- Other (specify): _____

What accommodations, if any, would you need to accomplish this volunteer position:

Provide any comments, questions, or concerns that you may have:

***Please attach a resume or a document that lists your previous work and volunteer experience as well as your educational background**

Applicants Signature: _____ **Date** _____