

PALOS VERDES ART CENTER

JUNIOR VOLUNTEER PROGRAM APPLICATION Summer 2011

NAME _____

ADDRESS _____

CITY _____ ZIP CODE _____

TELEPHONE _____ CELL/PAGER# _____

*HIGH SCHOOL _____ THIS YEAR'S GRADE _____

Volunteers must be at least 14 years of age

PARENT/GUARDIAN'S NAME _____

Recommending Teacher's Name _____ Subject _____

(Can be another adult other than relative)

Teacher's Statement _____

LANGUAGE: Bilingual? _____ Second Language? _____

WORK/VOLUNTEER EXPERIENCE:

Place of employment/volunteering:	Dates	Duties Performed
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YOUR HOBBIES AND INTERESTS:

Please write a statement about why you would like to join this program:

I agree, if accepted, to fulfill my commitment to assigned working days.

SIGNATURE _____ DATE _____