

VOLUNTEER INTEREST FORM

PERSONAL INFORMATION

LINSONAL		.						
Name:				Pronouns:				
Zip Code:				Birthdate (Month & Day):				
Email:				Phone Number:				
Preferred contact method:				I am 18 years of age or older: ☐ Yes ☐ No				
Emergency Contact:				Emergency Contact Phone:				
Please check	0 0							
English:	glish: □ Beginner/Intermediate □ Ad			·				
Spanish:	Spanish: □ Beginner/Intermediate □ Ad				Ivanced 🔲 Fluent/Native Speaker			
Other langua	ges spoken	and skill le	vels:					
AVAILABILI	TY							
	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	
Mornings								
Afternoons								
Evenings								
	•			•				
What length	of time do y	ou		How frequently are you looking				
anticipate volunteering with Mi Casa?				to volunteer?				
☐ Less t	han 1 montl	า						
□ 1-3 m	nonths							
□ 3-6 m	onths							
☐ More t	than 6 mont	hs						
Are you appl	ying for a sp	ecific volur	nteer openi	ng?				
			•	_				



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MI CASA PROGRAMS OF INTER	EST							
☐ Business Trainings	☐ Career Trainings	☐ Financial Services						
☐ Professional Services	☐ Medical Administration	☐ Human Resources						
☐ English as a Second Language	☐ Digital Literacy	☐ Office Support						
□Other:								
Why do you want to volunteer at	Mi Casa Resource Center?							
Please describe any relevant exp	erience education and/or	snecial skills:						
rease describe any relevant exp	cherice, education, and/or	opecial skills.						
I understand that this is a legal re	epresentation of my signatu	ire and that the information						
I have entered is accurate and true to the best of my knowledge. I have read and fully								
understand this release form and	l I understand that Mi Casa	will keep this form on file						
for a minimum of two (2) years.								
Name		Date						
Signature								
Overting 2 Contract Plans	Caale Valentaan C. Caasial D	wa waxaa Ca a udin aha u						
Questions? Contact Blue Cook, Volunteer & Special Programs Coordinator Volunteer@MiCasaResourceCenter.org								
voluniee	303.539.5610	uig						
	303.337.3010							

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Staff Use Only

Interview Scheduled:		
Interviewer:		
Interviewer		
Comments:		
Assignment:		
Dates/Time:		