



35 West Huron Street Suite 100 – Pontiac, MI 48342 – Phone (248) 858-7800, ext. 300
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CMLF Volunteer Application Form

Name: _____ Date: _____

Address: _____

Telephone Number: _____ Email: _____

Why are you interested in volunteering at Centro?

How did you hear about us?

Activities you may be interested in participating:

- | | | |
|---|--------------------------------------|---|
| <input type="checkbox"/> Interpretation | <input type="checkbox"/> Events | <input type="checkbox"/> Food bank |
| <input type="checkbox"/> Doing translations | <input type="checkbox"/> Office work | <input type="checkbox"/> Marketing & Design |
| <input type="checkbox"/> Client accompaniment | <input type="checkbox"/> Job search | <input type="checkbox"/> Organize donation drives |

Related to mental health (please specify): _____

Teaching a class (mention areas you would like to teach): _____

Other: _____

Availability:

Monday	Mornings_____	Afternoons_____	Evenings_____
Tuesday	Mornings_____	Afternoons_____	Evenings_____
Wednesday	Mornings_____	Afternoons_____	Evenings_____
Thursday	Mornings_____	Afternoons_____	Evenings_____
Friday	Mornings_____	Afternoons_____	Evenings_____
Weekends	Mornings_____	Afternoons_____	Evenings_____

Length of time (6 months, 1 year, indefinite): _____

Please complete the following information:

Education:

	Name & Address of School	Course of Study	# of Years Completed	Diploma/ Degree
High School (GED)				
Vocational/ Technical				
College/ University				
Graduate/ Professional				

References:

	Name	Address	Phone Number	Relationship
1				
2				

Employment/Volunteer Experience: (List 2 that are most relevant to this application)

Company: _____

Position: _____

Work Performed: _____

Company: _____

Position: _____

Work Performed: _____

Do you have any certificate/specialized training? Please list training below:

Technical Experience (add a percentage with level of proficiency or how comfortable you feel):

Word _____ Excel _____ Power Point _____ Web design _____
Social Media _____ Canva _____ Google Suite _____ Other software _____

Please read the following statements and sign below:

- I understand that Centro Multicultural La Familia will perform criminal background checks and I agree to provide, upon request, the information necessary for the checks to be performed.
- I understand that the results of the criminal background checks may affect my acceptance as a volunteer at Centro Multicultural La Familia.
- I have read over my answers on this application form and affirm that they are true and accurate to the best of my knowledge.
- I hereby authorize Centro Multicultural La Familia to inquire and verify any information on this application or other I submit as part of this application process.
- I understand and agree that, if I am selected as a volunteer, the making of any false or misleading statements, including the failure to disclose information as requested, (in this application or during the application process) may result in my volunteer termination at any time.
- I understand that I will be required to present valid photo identification in order for my submitted application to be fully accepted.

Date: _____ Applicant's Signature: _____

Photographs of Centro Multicultural La Familia's volunteers are occasionally taken for use in internal and/or external publications/media. Please sign below if you agree to be photographed for such purposes:

Date: _____ Applicant's Signature: _____

For volunteers under the age of 18

I understand that my child, _____, is applying to volunteer and I agree to his/her participation in the opportunities offered at Centro Multicultural La Familia.

Date: _____ Parent/Guardian Signature: _____

I hereby give approval for my child, _____, to be photographed for use in Centro Multicultural La Familia's internal and/or external publications/media.

Date: _____ Parent/Guardian Signature: _____