



American GI Forum  
NATIONAL VETERANS OUTREACH PROGRAM, INC.  
611 N. Flores, Suite 200  
San Antonio, TX 78205  
(210) 223-4088  
[www.agif-nvop.org](http://www.agif-nvop.org)

## VOLUNTEER APPLICATION

Please print and complete all sections

### GENERAL INFORMATION

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Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

Email address: \_\_\_\_\_

Preferred method of contact:  Home  Work  Cell  Text  Email

Preferred time for contact:  Morning  Afternoon  Evening

Employment status:  Full-time  Part-time  Unemployed  Retired

Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

Are you currently enrolled in school?  Yes  No

Will your volunteer work fulfill a requirement? \_\_\_\_\_

*If yes, indicate how many hours are needed:* \_\_\_\_\_

Are there any physical conditions that would limit your ability to perform certain tasks?

Yes  No

*If yes, what accommodations are required?* \_\_\_\_\_

\_\_\_\_\_

How did you hear about our volunteer opportunities? \_\_\_\_\_

### AVAILABILITY

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Availability (days, times, frequency):

- |                                   |                                    |                                   |
|-----------------------------------|------------------------------------|-----------------------------------|
| <input type="checkbox"/> Weekdays | <input type="checkbox"/> Morning   | <input type="checkbox"/> Ongoing  |
| <input type="checkbox"/> Weekends | <input type="checkbox"/> Afternoon | <input type="checkbox"/> One-time |
| <input type="checkbox"/> Anytime  | <input type="checkbox"/> Evenings  |                                   |

**EMERGENCY CONTACT** *Please provide two emergency contacts*

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Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_ Work: \_\_\_\_\_

**VOLUNTEER EXPERIENCE & INTERESTS**

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**Previous volunteer experience (when, where, tasks/projects):**

\_\_\_\_\_  
\_\_\_\_\_

**Special skills, hobbies, and interests:**

\_\_\_\_\_  
\_\_\_\_\_

**Why are you interested in volunteering with National Veterans Outreach Program?**

\_\_\_\_\_  
\_\_\_\_\_

**What are you looking to get out of your volunteer experience with us?**

\_\_\_\_\_  
\_\_\_\_\_

**AGREEMENT & SIGNATURE**

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By submitting this application and accompanying attachments, I affirm that the facts set forth in them are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me in this application and attached screening forms may result in refusal or separation from my volunteer position.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**OUR POLICY**

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It is the policy of American GI Forum National Veterans Outreach Program, Inc. to provide equal opportunities without regard to race, ethnicity, color, religion, national origin, gender, sexual preference, age, or disability.

***Thank you for completing this application and for your interest in volunteering!***