## Van Nuys Neighborhood Council Ambassador Application

<b>Contact Information</b>	
Name	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone	
E-Mail Address	
A 11 1 111/	
Availability	scilable for columba a conjugación de O
During which hours are you av	ailable for volunteer assignments?
Weekday mornings	Weekend mornings
Weekday afternoons	Weekend afternoons
Weekday evenings	Weekend evenings
1.11.	
Interests Tell us in which are as you are	interested in valuntagring
Tell us in which areas you are	interested in volunteering
Administration	
Events	
Field work	
Fundraising & Assisting	Non-Profit 501 (C3) with grant writing
Deliveries	
Phone bank	
Newsletter production	
Volunteer coordination	
Special Skills or Qualifica	tions
•	qualifications you have acquired from employment, previous volunteer work,
or through other activities, incl	

Summarize your previous volunteer experience.		
Person to Notify in Case	of Emergency	
Name		
Street Address		
City ST ZIP Code		
Home Phone		
Work Phone		
E-Mail Address		

## **Agreement and Signature**

**Previous Volunteer Experience** 

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

Name (printed)	
Signature	
Date	

## **Our Policy**

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

Thank you for completing this application form and for your interest in volunteering with us.