



Planned Parenthood[®] of Central New Jersey

69 E. Newman Springs Road, P.O. Box 95, Shrewsbury, NJ 07702 · P 732-842-9300 · F 732-842-9338 · www.ppcnj.org

I. VOLUNTEER/INTERNSHIP APPLICATION

NAME _____ DATE OF APPLICATION: ___/___/___

STREET ADDRESS _____ TOWN _____

ZIP CODE _____ BIRTHDATE ___/___/___

E-MAIL ADDRESS _____

HOME PHONE _____ CELL PHONE _____

WHEN WOULD BE THE BEST TIME TO CONTACT YOU? _____

EMERGENCY CONTACT _____ EMERGENCY CONTACT NUMBER _____

I AM APPLYING FOR (Please choose one):

INTERNSHIP: Please **also complete** Section II VOLUNTEER POSITION: Please **skip** Section II

II. INTERNSHIP INFORMATION

THIS SECTION IS FOR INTERSHIPS ONLY.

SCHOOL/COLLEGE ATTENDING _____

COLLEGE MAJOR _____ COLLEGE MINOR (if applicable) _____

ARE YOU CURRENTLY A: Freshman Sophomore Junior Senior Graduate Student

NAME OF COURSE REQUIRING INTERNSHIP _____

NAME OF INSTRUCTOR _____ CONTACT NUMBER _____

If selected, what would be your required start and end dates?

START _____ END _____ HOURS REQUIRED _____

Will you receive college credit for this internship? Yes No

III. GENERAL INFORMATION

HAVE YOU EVER VOLUNTEERED/INTERNEED BEFORE? YES NO

IF "YES", THEN WHERE? WHAT WERE YOUR RESPONSIBILITIES? _____

WHY ARE YOU INTERESTED IN VOLUNTEERING/INTERNING FOR PLANNED PARENTHOOD?

WHICH OF YOUR PERSONAL SKILLS/INTERESTS DO YOU WISH TO APPLY TO YOUR
VOLUNTEER/INTERNSHIP EXPERIENCE? _____

IV. EDUCATIONAL BACKGROUND

Name of School	Location	Major / Minor (if applicable)	Degree Obtained	Did You Graduate?
<i>High School</i>				
<i>College</i>				
<i>Graduate School</i>				
<i>Other Schools Attended</i>				

V. VOLUNTEER OPPORTUNITIES

PLEASE INDICATE THE TYPE OF VOLUNTEER/INTERNSHIP EXPERIENCE YOU ARE SEEKING:

___ **HEALTH CENTER:** Assisting the health center staff by helping to manage the charts and medical records. Assist clinical staff with translation (if Spanish speaking). Please indicate at which sites you would be willing to work:

___ FREEHOLD ___ HAZLET ___ NEW BRUNSWICK
___ PERTH AMBOY ___ SHREWSBURY ___ SPOTSWOOD

___ **EDUCATION:** Assist in distributing educational materials at health fairs and community events. Review materials (brochures, videos) for use in education programs. Assist with program development, including research and activities for education program. Assist in maintaining the PPCNJ resource library. Prepare evaluation summaries of education and training programs. (Based primarily out of Shrewsbury).

___ **PUBLIC AFFAIRS:** Assist with advocacy work surrounding reproductive rights, including: legislative updates, work with Planned Parenthood Action Network, voter registration and special projects. (Based primarily out of Shrewsbury).

___ **DEVELOPMENT AND SPECIAL EVENTS:** Assist with various invitation and report mailings. Make calls to individuals pertaining to annual appeals and upcoming events. Assist in file clean up and supplies organization projects. Volunteer as an event committee member for PPCNJ’s annual fundraising event; duties include: assisting with decorations and menu, soliciting auction contributions, advertising, and other duties as assigned. (Based primarily out of Shrewsbury).

VI. AVAILABILITY

VOLUNTEER OPPORTUNITIES MAY BE DATE-SPECIFIC (BASED ON PROJECTS OR EVENTS), ON-GOING, OR FLEXIBLE BASED ON YOUR SCHEDULE. PLEASE INDICATE YOUR AVAILABILITY.

VII. EMPLOYMENT BACKGROUND

CURRENT EMPLOYER (if applicable) _____

POSITION/TITLE _____ STARTING DATE OF EMPLOYMENT _____

WORK ADDRESS _____ WORK PHONE _____

VIII. REFERENCES

PLEASE LIST THE CONTACT INFORMATION FOR TWO PEOPLE, EXCLUDING RELATIVES.

NAME _____ RELATIONSHIP _____

STREET ADDRESS _____ TOWN _____

STATE _____ ZIP CODE _____ PHONE # _____

HOW LONG HAVE YOU KNOWN THIS PERSON? _____

NAME _____ RELATIONSHIP _____

STREET ADDRESS _____ TOWN _____

STATE _____ ZIP CODE _____ PHONE # _____

HOW LONG HAVE YOU KNOWN THIS PERSON? _____

IX. ADDITIONAL INFORMATION

ARE YOU INTERESTED IN THE FOLLOWING:

- RECEIVING OUR AGENCY NEWSLETTER? YES NO

- JOINING THE PLANNED PARENTHOOD ACTION NETWORK AND RECEIVE EMAIL UPDATES ON LEGISLATIVE ISSUES REGARDING REPRODUCTIVE RIGHTS? YES NO

- RECEIVING INFORMATION ABOUT UPCOMING EDUCATION AND TRAINING EVENTS, INCLUDING OUR "TEACHING TOOLS" NEWSLETTER? YES NO

SIGNATURE _____ DATE: _____

PRINT NAME _____