



Volunteer/Intern Form

Please complete all sections of the form and return to the Volunteer Program Manager at 2001 East Madison St, Seattle, WA 98122 or fax 206-328-6818.

Personal Information

Name _____ Date _____

Address _____

City _____ State _____ Zip _____

Email _____

Phone Number _____ Alternate Phone Number _____

Why do you want to volunteer at Planned Parenthood?

Area(s) of Interest

Please refer to the volunteer program flyer OR our website, plannedparenthood.org, and list a maximum of three preferences in the space below. Please be specific and include your preferred location.

Days and Times You are Available to Volunteer

Community Service Information

I am a student seeking internship/school credit. Name of School _____

I have been ordered by the court to perform community service. _____
number of hours

Employment Information

Are you currently employed? yes no

If yes, what is your current position? _____

Organization/Company Name _____

Previous Volunteer Experience

Position & Duties _____

Organization _____

Dates _____

Position & Duties _____

Organization _____

Dates _____

Education

Last School Attended	Major	Graduate?
_____	_____	_____

Are you fluent in any language other than English? yes _____ no

Language

References

Please do not use family members as references.

Name _____

Address _____

Phone _____

Email _____

Relationship to Applicant _____

Name _____

Address _____

Phone _____

Email _____

Relationship to Applicant _____

Emergency Contact

Name _____

Phone _____

Are you 18 years of age or older? yes no

Have you been convicted of a crime (misdemeanor or felony) in the past seven years? yes no

If yes, please give details and date of conviction. A conviction will not necessarily prevent you from becoming a Planned Parenthood volunteer. _____

With my signature, I attest that the information that I have provided is, to the best of my knowledge, true, and I grant PPGNW permission to contact the above named reference(s).

Signature

Date