



Planned Parenthood of New York City

## VOLUNTEER PROGRAM APPLICATION

Please complete this application and return it **along with a copy of your resume** to:

Volunteer Coordinator  
Planned Parenthood of New York City  
26 Bleecker Street, 6<sup>th</sup> Floor  
New York NY 10012  
[volunteer@ppnyc.org](mailto:volunteer@ppnyc.org)

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### A. PERSONAL INFORMATION (CONFIDENTIAL)

Name \_\_\_\_\_ Date \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Phone (day) \_\_\_\_\_ Phone (evening) \_\_\_\_\_ Mobile \_\_\_\_\_  
E-mail \_\_\_\_\_ Fax \_\_\_\_\_  
Best Time to Contact \_\_\_\_\_ Are you over 18 years of age?  Yes  No

Are you interested in: ( ) Volunteer Service ( ) Internship

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How did you hear about Planned Parenthood of New York City (PPNYC)?

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

Why are you interested in volunteering with PPNYC?

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

What would you like to gain from your experience as a PPNYC volunteer?

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

If you have worked and/or volunteered for Planned Parenthood, state where/when, final position and reason for leaving:

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

**B. PREVIOUS VOLUNTEER EXPERIENCE**

Organization	Position & Duties	Service Dates
1. _____	_____	_____
	_____	
2. _____	_____	_____
	_____	
3. _____	_____	_____
	_____	

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**C. REFERENCES**

(1 Personal and 1 Professional, not including relatives)

Name	Relationship	Organization/Agency	Phone Number
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

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**(ONLY COMPLETE SECTION D. IF APPLYING FOR AN INTERNSHIP)**

**D. INTERNSHIP/COMMUNITY SERVICE INFORMATION**

Student Status? ( ) Full Time ( ) Part-Time

Are you doing your internship for school credit or to meet class requirements? \_\_\_\_\_

If so, how many hours are required? \_\_\_\_\_

Time commitment? Start \_\_\_\_\_ End \_\_\_\_\_

School Name: \_\_\_\_\_ Degree \_\_\_\_\_

Area of Study \_\_\_\_\_

Internship Objectives:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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\*Please attach any information on your school's internship requirements and learning goals.

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## E. AREA(S) OF INTEREST

Please indicate the type(s) of volunteer opportunities which interest you.

### Health Centers

- Client Greeter
- Client Liaison
- Recovery Room Assistant
- Administrative Assistant
- Other

### Public Affairs

- Advocacy/Public Information
- Media/Communications
- Community Events/Outreach
- Health Center Escort
- Other

### Executive Office/Administration\*

- Data Entry
- Program Support
- Administrative Assistance
- Special Events
- Monthly Volunteer Nights
- Fundraising
- Mailings
- Other

\*Cross-Department Opportunities

## F. SCHEDULING

Are you available  weekdays  weekends?

Please indicate the times you would be available (check all that apply):

	Morning 9am - 12pm	Midday 11am - 3pm	Afternoon 12pm-5:00pm	Evening <sup>1</sup> 6-8:30
<input type="checkbox"/> Monday				
<input type="checkbox"/> Tuesday				
<input type="checkbox"/> Wednesday				
<input type="checkbox"/> Thursday				
<input type="checkbox"/> Friday				
<input type="checkbox"/> Saturday <sup>2</sup>				N/A

<sup>1</sup> Only available once a month

<sup>2</sup> Administrative office closed, but the clinics are open

Period of time you would like to commit:

- 1 semester (if applicable)
- 6 months
- 1 year or more

Please note any seasonal, school, travel, or other scheduling difficulties: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**G. OTHER INFORMATION**

Do you have any special skills that you could use in a volunteer placement (computer skills, research, counseling/medical training, etc.)?

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Do you have any language skills in addition to English? Please list.

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Do you have any special areas of interest that you could use in a volunteer placement?

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Would you like to join our mailing list of pro-choice activists? ( ) yes ( ) no

Would you like to receive information from PPNYC's Development Department regarding special events and benefits? ( ) yes ( ) no

Would you be interested in getting involved in PPNYC advocacy work through the Activist Council? ( ) yes ( ) no

Thank you.