

Inspiring all Girls to be Strong, Smart and Bold!-<sup>SM</sup>



**Girls Incorporated<sup>®</sup> of Shelbyville/Shelby County  
Barbara J. Anderson Center  
100 Strong Women Volunteer Application**

**PERSONAL INFORMATION**

Last Name:	First Name:	Middle Initial
Maiden Name (if applicable)	Birthdate ____ / ____ / ____	Ethnicity:
Full Address:	City, State	Zip Code:
Home Phone ( )	Work Phone ( )	Cell Phone ( )

**Email address:**

Current place of work:

Current job position:

Please complete the following assessment:

How did you learn about Girls Inc.?

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Volunteer Fair | <input type="checkbox"/> Current Volunteer | <input type="checkbox"/> Volunteer recruitment website |
| <input type="checkbox"/> Friend         | <input type="checkbox"/> School            | <input type="checkbox"/> Other _____                   |

**EDUCATION AND TRAINING**

Please include information from college, and/or other educational training.

Institution Name	Area/Major	Years Studied
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**TIME COMMITMENT/AVAILABILITY**

Fixed Schedule  Need Flexible Schedule (please include times)

	Monday	Tuesday	Wednesday	Thursday	Friday
Morning					
Afternoon					
Evening					

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### VOLUNTEER INTERESTS

What volunteer opportunities interest you at Girls Incorporated?

Center Programs	Outreach Programs	Support Services
<input type="checkbox"/> Media Literacy <sup>SM</sup>	<input type="checkbox"/> Assist program Instruction	<input type="checkbox"/> Women in Science Expo Presenter
<input type="checkbox"/> Culture/Arts	<input type="checkbox"/> Discovery Leadership Program Speaker	<input type="checkbox"/> Research
<input type="checkbox"/> Science and Math Education		<input type="checkbox"/> Data Management
<input type="checkbox"/> Academic Tutoring/ Homework		<input type="checkbox"/> Marketing
<input type="checkbox"/> Sports, Health and Fitness		<input type="checkbox"/> Special Events
<input type="checkbox"/> Youth Leadership		Enchanted Voyage
<input type="checkbox"/> Economic Literacy <sup>SM</sup>		Fall Fashion
		American Girl Tea Celebration
<input type="checkbox"/> Self-Defense and Safety		<input type="checkbox"/> Robotic Team Mentoring
<input type="checkbox"/> Child Abuse Prevention		
<input type="checkbox"/> Social Skill Building	Specific Volunteer Project:	

What other skills do you have that could benefit Girls Incorporated during your volunteer experience?

<input type="checkbox"/> Microsoft Excel	<input type="checkbox"/> Special Event Planning	Specifically areas of interest:
<input type="checkbox"/> Microsoft Word	<input type="checkbox"/> Fundraising	<input type="checkbox"/> Science
<input type="checkbox"/> Program Tracking Evaluation	<input type="checkbox"/> Social Work/Counseling	<input type="checkbox"/> Mathematics
<input type="checkbox"/> Graphic Design	<input type="checkbox"/> Leading activities with groups	<input type="checkbox"/> Culture/Arts
<input type="checkbox"/> Marketing/Public Relations	<input type="checkbox"/> Spanish Speaker	<input type="checkbox"/> Technology
	<input type="checkbox"/> Technical Support	
<input type="checkbox"/> Other: (Please explain)		

Please list hobbies, interests, club affiliations, previous volunteer or work experience that would contribute to your experience at Girls Inc.:

### BEST WAY TO REACH YOU

What is the best way to reach you? Phone Email Mail Other: \_\_\_\_\_

When is the best time to reach you? Morning Afternoon Evening Specific Time: \_\_\_\_\_

Is there a day of the week that is best for you? If so, which day(s)? \_\_\_\_\_

Is there a day of the week that does NOT work for you? If so, which day(s)? \_\_\_\_\_

Volunteer Signature: \_\_\_\_\_

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