



SED CENTER VOLUNTEER APPLICATION

4110 Kansas Avenue, N.W., WASHINGTON, D.C. 20011 TEL. (202) 722-4404

P	Last Name	First	Middle	Date
	Street Address			
R	City, State, Zip			Business Telephone ()
	Occupation	Employment		Cell Phone ()
O	School	Major		Fax number ()
	Additional Information <input type="checkbox"/> Fluent in Spanish <input type="checkbox"/> Some Spanish <input type="checkbox"/> No Spanish			Date of Birth
A	In case of emergency notify			Telephone # ()
	What are your areas of interest?			Sex <input type="checkbox"/> M <input type="checkbox"/> F
L	E-mail			

Available to meet <table style="width: 100%; text-align: center;"> <tr> <td></td> <td>Morn</td> <td>After</td> <td>Eve</td> </tr> <tr> <td>Mon</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Tues</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Wed</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Thurs</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Fri</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Sat</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>Sun</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table> Time: From _____ to _____		Morn	After	Eve	Mon	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Tues	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Wed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thurs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Fri	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Sun	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	I will be available to begin First day _____ Last day _____ EDUCATION <input type="checkbox"/> Grammar School <input type="checkbox"/> Youth 6-17 <input type="checkbox"/> High school <input type="checkbox"/> Adult 18-29 <input type="checkbox"/> College <input type="checkbox"/> Adult 30-65 <input type="checkbox"/> Post Graduate <input type="checkbox"/> Over 65 <input type="checkbox"/> Other RELIGION <input type="checkbox"/> Protestant <input type="checkbox"/> Jewish <input type="checkbox"/> Catholic <input type="checkbox"/> Other	What program will you work? <input type="checkbox"/> ESL <input type="checkbox"/> Infants <input type="checkbox"/> Preschool <input type="checkbox"/> After School <input type="checkbox"/> Fundraising <input type="checkbox"/> Administration <input type="checkbox"/> Proposal Writing <input type="checkbox"/> Administration ETHNIC GROUP <input type="checkbox"/> Asian <input type="checkbox"/> Black <input type="checkbox"/> Caucasian <input type="checkbox"/> Hispanic <input type="checkbox"/> Native American <input type="checkbox"/> Other	HOW DID YOU HEAR OF SED? <input type="checkbox"/> Other volunteer <input type="checkbox"/> Friends <input type="checkbox"/> City Paper <input type="checkbox"/> Vol. Clearinghouse <input type="checkbox"/> Flyer <input type="checkbox"/> George Washington U. <input type="checkbox"/> American U. <input type="checkbox"/> Georgetown U. <input type="checkbox"/> Nat'l Lit. Organization <input type="checkbox"/> Schools <input type="checkbox"/> College <input type="checkbox"/> Phone Book <input type="checkbox"/> Television <input type="checkbox"/> Washington Post <input type="checkbox"/> Internet <input type="checkbox"/> Other
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WHERE WILL YOU WORK?
 Kansas Avenue
 Silver Spring, Md.
 Other

Teaching Experience, If any (describe)

Previous Volunteer experience

Please provide two references

_____ Tel. _____

_____ Tel. _____