



LITERACY VOLUNTEERS OF MARICOPA COUNTY
Volunteer Application

Today's Date _____

Street Address _____ Apt # _____

City _____ State _____ Zip Code _____

Phone: _____ Home _____ Cell _____

Email: _____

Gender: [] Male [] Female

Primary Language: _____

Other Language(s): _____

[] Speak [] Read [] Write

Does your employer have a matching gifts program?
Many employers will match their current and retired employees'
contributions. May we note your employer's name for this purpose?
[] Yes [] No

Have you been convicted of a felony? [] Yes [] No
If 'yes,' please explain: _____

Occupation: _____

Employer: _____

Date of Birth: _____

Your Education:

- [] Grade 9-11
[] H.S. Diploma
[] Undergraduate Degree
[] Graduate Degree
[] Not Available

Your Age Group:

- [] 16-18
[] 19-21
[] 22-24
[] 25-44
[] 45-59
[] 60 or older

Your Employment:

- [] Full-Time
[] Part-Time
[] Unemployed
[] Retired
[] Disabled
[] Not in Labor Force

Referred to LVMC by:

- [] Employer
[] Friend/Family
[] Library
[] Online
[] Television
[] Radio
[] Newspaper
[] Billboard
[] Flyer
[] Other _____

Location preference:

- [] Reed/Sunnyslope Learning Center
729 E. Hatcher Road; Phoenix 85020
Monday-Thursday 8:00 AM-8:00 PM
Friday 8:00 AM-4:30 PM
[] Main/Indian School Learning Center
1616 E. Indian School Road, #200
Phoenix, AZ 85016
Monday-Thursday 8:00 AM-8:00 PM
Friday 8:00 AM-4:30 PM

What are some of your previous volunteer experiences and how might they benefit you? _____

Skills you would enjoy using: _____

What days/times are you available? _____

How do you envision your volunteer time with LVMC? _____