

NSU Volunteer Center
Service Application
(for organizations)

Name of organization: _____

Sex: female / male / co-ed

Age (age ranges): _____

Address: (permanent or campus)

Telephone: _____

Email: _____

(If applicable) We require _____ service hours.

We want to volunteer _____ times per week / month.

We want to volunteer days / evenings / weekends / holidays. (Circle all that apply)

We want to work with these causes:

- ___ Animals
- ___ Children/Youth
- ___ Disabled Persons
- ___ Domestic Violence
- ___ Education/Tutor
- ___ Emergency Service
- ___ Environment
- ___ Health Care
- ___ Homeless/Hunger
- ___ Mentor
- ___ Seniors
- ___ Other (specify) _____

Skills, talents, or personality traits that we would like to contribute are:

We want to volunteer because:

