



Volunteer Application

Full Name: _____

Any Previous Names or Aliases: _____

Date of Birth: _____ Phone Number: _____

Street Address: _____

Email Address: _____

Prior volunteer experience:

Please describe your computer experience & abilities:

Please describe your education and relevant work experience or feel free to attach a resume*:

Please list the areas of PLS that you are interested in working in (i.e. reception, screening, clerical etc.):

Availability:

Day(s) of Week (Please select all that apply): M T W Th F

A.M. P.M.

Are you able to commit to a minimum of three months of volunteering? Yes No

Are you able to commit to a minimum of four hours per week? Yes No

I can work in the following counties (Please select all that apply):

Buncombe Madison Henderson Polk Rutherford Transylvania

How did you hear about Pisgah Legal Services? _____

***Please provide two academic/professional references: name, position, email, and phone number.**

1. _____

2. _____

Please initial:

By my signature below, I give my permission to Pisgah Legal Services to conduct a background check on me. I also certify that typing my name qualifies as my personal signature.

Signature

Date