Liberia Economic & Social Development, Inc. (LES) Volunteer Form
(954) 924-3636 | E: jwashington@leshelps.com
3220 N 24th Ave Hollywood, FL 33020

PERSONAL INFORMATION:

First Name: | **Last Name:**

Gender: ☐ MALE ☐ FEMALE

Phone Number: | **Date of birth:**

Address: | **Emergency Contact Information:**

E-mail:

AVAILABILITY:

Days and times available for volunteering

Day	Available (Yes/No)	Time Available
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		
Sunday		

Frequency of Availability (weekly, monthly, etc.):

Areas of Interest (check all that apply)?

☐ Food Pantry   ☐ Presentations   ☐ Workshop Training   ☐ Fundraising

Specific roles or tasks you are interested in (check all that apply)?

☐ Event Planning   ☐ Social Media Management   ☐ Marketing   ☐ Graphic Design

☐ Photography   ☐ Fundraising   ☐ Other: _____

SKILLS AND EXPERIENCE:

Relevant Skills (check all that apply)?

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☐ **Marketing**   ☐ **Graphic Design**   ☐ **Photography**   ☐ **Other:**

_____

Previous volunteer experience (if any): _____

_____

_____

LANGUAGES SPOKEN:

Ability to communicate in languages other than English (if applicable): _____

_____

REFERENCES:

Contact information for two references (name, relationship, phone number):

First Name:		Last Name:	
Phone Number:		**Relationship:**	

First Name:		Last Name:	
Phone Number:		**Relationship:**	

VOLUNTEER AGREEMENT:

Check the below boxes if you agree:

☐ **Consent to a background check (if required)**

☐ **Agreement to abide by organization policies and procedures**

☐ **Willingness to attend orientation or training sessions (if applicable)**

(Date)	(Signature)

Printed Name