

**STATE OF HAWAII
HAWAII PUBLIC HOUSING AUTHORITY
VOLUNTEER APPLICATION**

NAME _____ DATE _____
 Last First M.I.

ADDRESS _____
 Street Apt. No. City Zip Code

HOME PHONE: _____ WORK PHONE: _____

EDUCATION (Please circle the last year completed):

. Grade: 5 6 7 8 9 10 11 12
. College: 1 2 3 4 Degree: _____
. Graduate School: 1 2 3 4 Degree: _____

OCCUPATION: _____

PREVIOUS VOLUNTEER EXPERIENCE: _____

INTERESTS, SKILLS,
HOBBIES: _____

AVAILABILITY:

. What days of the week are you available? (Please circle)
 Sunday Monday Tuesday Wednesday Thursday Friday Saturday
. What hours are you available? (Please include the total hours per week)

. What is your available starting date and ending date?
Start date: _____ Ending date: _____

OTHER QUESTIONS:

. What kinds of activities are you interested in performing (i.e., clerical work, research, etc.)?

