

Volunteer Application

2020 Tax Year

This application is for new and returning volunteers and must be completed yearly. Please fill in the appropriate information. If you have changes to a previously submitted application, you may complete a new application with the correct information and submit it to our address below.

Please mail or fax to:

United Way of Porter County
951 Eastport Center Drive
Valparaiso, IN 46384-2028
(219) 464-3583
Fax:(219) 477-5845
george@unitedwaypc.org

INFORMATION ABOUT YOU:

FIRST NAME: _____ LAST NAME: _____

HOME STREET ADDRESS: _____ CITY: _____

STATE: _____ ZIP/POST CODE: _____

HOME PHONE: _____ WORK PHONE: _____ EXTENSION: _____

EMAIL: _____

LANGUAGES SPOKEN OTHER THAN ENGLISH: _____

ARE YOU A PREVIOUS VOLUNTEER? (Check) YES OR NO. IF YES, HOW MANY YEARS? _____

IF YOU ARE AN IRS EMPLOYEE, PLEASE ENTER YOUR WORK MAIL STOP: _____

INFORMATION ABOUT VOLUNTEERING:

PLEASE CIRCLE THE VOLUNTEER OPPORTUNITIES YOU ARE INTERESTED IN

- | | | |
|-------------------------------|--|--|
| Volunteer Screener | Volunteer Tax Assistor | Volunteer Quality Reviewer |
| Volunteer Site Coordinator | Volunteer Recruitment/Publicity Specialist | Volunteer Training Specialist |
| Volunteer Computer Specialist | Volunteer Interpreter | Volunteer Electronic Filing (EFT) Specialist |

IN WHAT CITY OR METRO AREA WOULD YOU LIKE TO VOLUNTEER? _____

IF KNOWN, PLEASE INDICATE YOUR SITE PREFERENCE(S): _____

HAVE YOU EVER PREPARED RETURNS USING IRS E-FILE SOFTWARE? (Check) YES OR NO.

DAYS AND HOURS AVAILABLE TO VOLUNTEER (FILL-IN ALL THAT APPLY) :

MONDAY FROM _____ TO _____ THURSDAY FROM _____ TO _____

TUESDAY FROM _____ TO _____ FRIDAY FROM _____ TO _____

WEDNESDAY FROM _____ TO _____ SATURDAY FROM _____ TO _____