

Navajo Evangelical Lutheran Mission

Volunteer Application

Contact Information of Group Leader

Name	
Organization	
Preferred Dates of Arrival and Stay	
Alternative Date	
Number of Individuals	
Age Range of Individuals	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone	
E-Mail Address	

Purpose of Visit

Interests

These are areas where we need assistance

- Maintenance
- Field Work
- Computer/Electronics
- School Tutoring/School Projects/VBS
- Medical/Dental/Vision Services
- Campbell Soup/Box Tops Production
- Other

Please describe your desired volunteer area:

Previous Volunteer Experience and Special Skills or Qualifications

Summarize your group's previous volunteer experience and special skills or qualifications the group has acquired from employment, previous volunteer work, or through other activities, including hobbies or sports.

Designate One Person to Notify in Case of Emergency For Group Members

Name
Street Address
City ST ZIP Code
Home Phone
Work Phone
E-Mail Address

Agreement and Signature of Group Leader

Name (printed)
Signature
Date

Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

Thank you for completing this application form and for your interest in volunteering with us.

All volunteer applications must be approved by the Executive Director and are subject to changes.