



# Chinese - American Planning Council

## Volunteer Program

150 Elizabeth Street, New York, NY 10012  
Tel: (212) 941-0920 Fax: (212) 966-8581

[www.cpc-nyc.org](http://www.cpc-nyc.org)  
[volunteer@cpc-nyc.org](mailto:volunteer@cpc-nyc.org)

Revised 06/2005

## Volunteer Application

Name:

\_\_\_\_\_

Last

First

Middle

Address:

\_\_\_\_\_

Number, Street, & Apt #

\_\_\_\_\_

City

State

Zip Code

Home Phone #: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Other Contact/Cell #: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

E-mail: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/19\_\_\_\_

Gender: F M

Have you ever committed a crime? NO YES (if yes, please explain using additional paper)

Why are you interested in volunteering at CPC?

\_\_\_\_\_  
\_\_\_\_\_

What do you wish to get out of from this volunteer experience?

\_\_\_\_\_  
\_\_\_\_\_

How many hours per week do you wish to volunteer? \_\_\_\_\_

How long do you wish to volunteer? \_\_\_ Short Term \_\_\_ Long Term \_\_\_ Occasionally

When are you available? Start Date \_\_\_\_\_ - End Date \_\_\_\_\_

Please write the hours available beneath the days you're able to volunteer.

Monday	Tuesday	Wednesday	Thursday	Friday

What language(s) do you speak? (Check all that apply) \_\_\_ Chinese (Cantonese) \_\_\_ Chinese (Mandarin)  
\_\_\_ Chinese (Fujianese) \_\_\_ English \_\_\_ Spanish \_\_\_ Others \_\_\_\_\_

What skills and/or interests do you have? (i.e. - typing, filing, drawing, music, dance, singing)

\_\_\_\_\_  
\_\_\_\_\_

Please return to CPC Volunteer Department

**Education Level:** *Please list your education background.*

Name of School & Location (City, State)	Major	Last Grade Completed	Degree (if any)

**Previous Work/Volunteer Experience:** *Attach additional sheet if necessary.*

Organization (Name & Location – City, State)	Job Title	Date of Service	Brief Description of Duties

**How did you hear about us?**

Newspaper   
  Radio   
  Flyer   
  Website   
  School   
  Friend (Name: \_\_\_\_\_)  
 Others (Please specify \_\_\_\_\_)

**Additional Comments/Questions:**

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**Certification**

I certify that the information provided on this application is true and accurate. I understand that the withholding of any information sought by this application, or the giving of false information may result in my disqualification from consideration for volunteer service for CPC or, if discovered after I have begun volunteering at CPC, my termination as a volunteer at CPC.

**I HAVE READ THE ABOVE PRIOR TO SIGNING THIS APPLICATION.**

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Comments (Office use only):** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_