



Please return completed form to:  
Volunteer Coordinator  
Enterprise for High School Students  
200 Pine Street, Suite 600  
San Francisco, CA 94104  
415-392-7600  
fax 415-392-7611  
ericas@ehss.org

## VOLUNTEER APPLICATION

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Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Home Address: \_\_\_\_\_ Business Address: \_\_\_\_\_

Check preferred mailing address:  Email  Home  Business

Best way to contact you: \_\_\_\_\_

Phone: Day \_\_\_\_\_ Evening \_\_\_\_\_ Cell \_\_\_\_\_

In case of emergency, please notify: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship: \_\_\_\_\_

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List previous experiences (paid, volunteer, etc.) \*Note: You may also attach resume.

Job/Volunteer Title Dates	Organization	Duties
_____	_____	_____
_____	_____	_____
_____	_____	_____

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*over*

What was your most rewarding volunteer experience? Why?

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Describe your experience working with high-school aged youth.

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Languages spoken and/or written other than English?

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How did you hear about us?

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Are you a former Enterprise member?

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Please check the group(s) with whom you are most interested in working:

_____ Adults	_____ Youth	_____ EHSS Staff
_____ Community	_____ Non-interactive	_____ Other (specify) _____

Please check the opportunity or kind of activity you are most interested in:

_____ Advisor	_____ Administrative/clerical/mailings
_____ Career Panelist	_____ Counseling
_____ Corporate Outreach	_____ Finance (incl. bookkeeping)
_____ Internship Supervisor	_____ Fundraising/grant writing research
_____ Job Search Assistant	_____ Job development
_____ Outreach Assistant	_____ Newsletter production
_____ Party Assistance Workshop Instructor	_____ Reception

If you are interested in speaking engagements/teaching, please indicate the types of courses and/or events you are most interested in and/or skilled to teach:

- Career panels
- CEP summer workshops
- Customer service
- Entrepreneurship
- First aid/CPR
- Job readiness workshops
- Party help workshops
- Other (specify) -----

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Approximately how much time could you give? -----  
(Hours per month)

Availability:

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

----- Daily ----- Weekly ----- Monthly ----- Seasonally (summer, holidays, etc.)

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Please list two personal and/or professional references:

Name: ----- Phone: -----

Name: ----- Phone: -----

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I understand that my service at Enterprise for High School Students is entirely voluntary. I am freely donating any work or service I perform, and I do not expect any compensation or return, whether in money, goods, or otherwise. I understand that I am not considered an employee of Enterprise for High School Students, and therefore I am not covered by any Worker's Compensation Policy, or any other policy pertaining to Enterprise for High School Students employees.

Signature -----

Date -----

*Thanks in advance for your generosity!*