



P.O. Box 3103, New Brunswick, NJ 08903-3103
☎(732) 435-1414 📠(732) 435-1411 ✉manavi@manavi.org

VOLUNTEER APPLICATION FORM

Name: _____

Address: _____

Phone: (Work) _____ **(Home)** _____ **(Cell)** _____

E-mail: _____

Languages: Written _____

Spoken _____

Why are you interested in volunteering with *Manavi*? Please use at least 100 words in your response. You can use page 3 for additional space.

Can you make a commitment to volunteer at *Manavi* for at least six months?

Yes _____ **No** _____

Please indicate your availability for volunteer work.

Weekdays _____ **Weekends** _____ **Week Evenings** _____

Please note that everyone interested in volunteering with *Manavi* is required to attend an orientation session, which is held twice a year. The next orientation session has not yet been decided. If possible, will you attend a future orientation session?

Yes _____ **No** _____

If you are unable to volunteer at this time, would you be interested in being on *Manavi's* mailing list to receive a Monthly E-newsletter and a print Newsletter published about twice a year.

Yes _____ **No** _____

Please e-mail this form, attention 'Volunteer Coordinator' at: manavi@manavi.org

OR fax it at: 732-435-1411

OR mail it to: Manavi, P.O. Box 3103, New Brunswick, NJ 08903

* Please note that space for volunteer orientations is limited to 20 participants, so please send us this form at your earliest convenience. We will send out the next volunteer orientation as soon as it's decided.