



VOLUNTEER QUESTIONNAIRE

Date:

Name:

Address:

Day Phone:

Evening Phone:

Cell Phone:

Email address:

Date of birth (day, month & year):

Current Occupation:

Other relevant employment/educational experience:

Languages other than English:

Previous volunteer experience (organization & position):

Reason for volunteering for Seva:

Your Potential Availability

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
morning							
afternoon							
evening							

not sure, just give me a call when you need me

Which volunteer activities might you be interested in pursuing?

- General office support (filing, stuffing envelopes, shredding etc)
- Computer data entry (checking lists, entry into programs such as Excel)
- Special events support (greeters, ticket takers, food serving, information or sales table)
- Distributing promotional material (cards, posters, catalogues and calendars around town)
- Calendar and product sales

Do you have a vehicle? __ yes __ no

Where did you hear about Seva?:

Any Comments?:

Please return this form to Seva by emailing to volunteer@seva.ca
or faxing it to (604) 733-4292
or mailing it to Seva Canada #100 – 2000 West 12th Avenue, Vancouver, B.C. V6J 2G2

For office use only: eTapestry date:
