

# Catholic Charities Preferred Communities Program Volunteer Application

Thank you for your interest. Please email [elise.schack@ccwny.org](mailto:elise.schack@ccwny.org) with questions.

\* Required

First Name: \*

Your answer

Last Name: \*

Your answer

Age: \*

Your answer

Email address: \*

Your answer



Phone number: \*

Your answer

Best time to be called for a phone interview during office hours (9:00am-5:00pm): \*

Your answer

Availability for program: \*

Your answer

Do you need volunteering hours? If yes, how many: \*

Your answer

Are you currently in college? If yes, or graduated, please state where you go/went and what major/ degree you have. \*

Your answer



Are you pursuing this volunteer opportunity to fulfill a service requirement/  
school requirement? \*

Yes

No

Are you currently employed? If yes please state full-time or part-time and where  
you are employed. \*

Your answer

What kind of past volunteer experience do you have? \*

Your answer

Why are you interested in volunteering for Catholic Charities? \*

Your answer

Have you ever taught English, worked as a tutor or worked as a mentor before? \*

Your answer

Do you speak any languages other than English? \*

Your answer



Submit

Never submit passwords through Google Forms.

This content is neither created nor endorsed by Google. [Report Abuse](#) - [Terms of Service](#) - [Privacy Policy](#).

# Google Forms

