**We depend on the support, energy, and talents of many community volunteers!**

Volunteers serve in many capacities from ESL teaching, to office support, to fundraising and are provided training and support. Our volunteers have unique opportunities make human and social change, and learn from the Latino immigrant community.

***A BACKGROUND CHECK IS REQUIRED FOR ALL APPLICANTS 16 YEARS AND OLDER.***

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| **CENTRO LATINOAMERICANO VOLUNTEER AND INTERNSHIP APPLICATION** | | | | | | | | | | | | | | |
| TODAY’S DATE | | | NAME *(FIRST NAME, MIDDLE INITIAL, LAST NAME)* | | | | | | | | | | | |
|  | | |  | | | | | | | | | | | |
| ADDRESS | STREET | | | | CITY | | | | STATE | | | | ZIP CODE | |
|  | | | |  | | | |  | | | |  | |
| E-MAIL | | | | | HOME PHONE | | | | | CELL PHONE | | | | |
|  | | | | |  | | | | |  | | | | |
| BEST TIME AND NUMBER TO BE REACHED | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | |
| **VOLUNTEER AND INTERNSHIP OPTIONS** *(CHECK ALL THAT APPLY)* | | | | | | | | | | | | | | |
| HUMAN SERVICES ADMINISTRATIVE ASSISTANT  RECEPTION COVERAGE **(ON CALL)**  TABLING AND OUTREACH ASSISTANT  FUNDRAISING AND SPECIAL EVENTS ASSISTANT  COMPUTER LAB ASSISTANT  BEHAVIORAL HEALTH ADMINISTRATIVE ASSISTANT | | | | | YOUTH MENTOR/ADVOCATE  CITIZENSHIP CLASS INSTRUCTOR **(11 SESSION COMMITMENT)**  FOOD BOX PROGRAM ASSISTANT  OTHER: | | | | | | | | | |
| **TIME AVAILABLE TO VOLUNTEER** *(CHECK ALL THAT APPLY)* | | | | | | | | | | | | | | |
| MONDAY  TUESDAY  WEDNESDAY  THURSDAY  FRIDAY  SATURDAY | | | | | | | | | | | | | | |
| AVAILABLE TIME(S) OF DAY | |  | | | | ARE YOU 18 YEARS OR OLDER? | | YES  NO | | | IF YOU’RE NOT 18 OR OLDER, HOW OLD ARE YOU? | | |  |
| **REFERENCES** | | | | | | | | | | | | | | |
| **NAME** | | | | **RELATIONSHIP** | | | **TELEPHONE NUMBER** | | | | | **BEST TIME TO REACH** | | |
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| ***THIS SECTION TO BE COMPLETED BY INTERN CANDIDATES ONLY*** | | | | | |
| INTERNSHIP TERM | FALL  WINTER  SPRING  SUMMER | | INTERNSHIP YEAR |  | JUNIOR  SENIOR |
| NAME OF SCHOOL YOU ARE CURRENTLY ATTENDING | |  | | | |
| DEPARTMENT OF STUDY | |  | | | |
| NAME OF DIRECT SCHOOL PROGRAM SUPERVISOR | |  | | | |
| NUMBER OF HOURS YOU ARE REQUIRED TO COMPLETE | |  | | | |

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| **BACKGROUND CHECK INFORMATION** |
| A $10.00 NON-REFUNDABLE FEE IS PAID DIRECTLY TO THE OREGON STATE POLICE ONLINE.  VOLUNTEER AND INTERNSHIP OPPORTUNITIES ARE SUBJECT TO THE SUBMISSION OF A BACKGROUND CHECK.  YOU MAY ACCESS THE ONLINE BACKGROUND CHECK AT: <https://xn.osp.state.or.us/openrec/> |

**PLEASE KEEP YOUR APPLICATION TO NO MORE THAN 2 PAGES.**

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| **WE WOULD LIKE TO KNOW MORE ABOUT YOU AND YOUR EXPERIENCE** |
| **HOW DID YOU FIND OUT ABOUT CENTRO LATINO AMERICANO?** |
|  |
| **EDUCATIONAL BACKGROUND AND VOLUNTEER EXPERIENCE** |
|  |
| **SOCIAL JUSTICE BACKGROUND AND EXPERIENCE** |
|  |
| **SPANISH SPEAKING, WRITING, AND/OR READING ABILITIES** |
|  |
| **ANY OTHER SKILLS YOU WOULD LIKE US TO KNOW ABOUT?** |
|  |
| **OTHER CLUBS OR ORGANIZATIONS IN WHICH YOU ARE CURRENTLY ACTIVE** |
|  |
| **DESCRIBE YOUR EXPERIENCE WITH PEOPLE OF CULTURAL OR SOCIECONOMIC BACKGROUNDS DIFFERENT THAN YOUR OWN.** |
|  |
| **WHY DO YOU WANT TO VOLUNTEER AT CENTRO LATINOAMERICANO?** |
|  |
| **WHAT WOULD YOU LIKE TO LEARN FROM THIS EXPERIENCE?** |
|  |
| **FUNDRAISING AND SPECIAL EVENTS**; PLEASE DESCRIBE YOUR EXPERIENCE IN THESE AREAS. |
|  |

Please return completed application by e-mail: **twhitbread@centrolatinoamericano.org**

Or mail to**:**

**Trevor Whitbread, Director of Programs**

**Centro Latino Americano**

**944 W 5th Ave Eugene, OR 97402-5106**

If you have any questions please feel free to contact Trevor at 541-687-2667 EXT 112

***¡Muchas gracias!***