

## **College for Kids**

Volunteer Employment Application
You can email your application to <a href="mailto:bfredette@westfield.ma.edu">bfredette@westfield.ma.edu</a> or send it through regular mail to: College for Kids, Westfield State University, 333 Western Avenue, Westfield MA, 01085

Basic Information				
Name				
Address				
City/State/Zip				
Home Phone				
*Volunteer Cell				
Phone				
Email				
Date of Birth				
In case of an emergency, who can we contact?				
Name				
Relationship				
Phone				
*Volunteer's cell phor	e will only be used in	n case of an emergenc	y during the College fo	or Kids program.
Availability				
Please check the boxes of the sessions you are available to volunteer.				
	Week 1	Week 2	Week 3	Week 4
	(July 12-16)	(July 19-17)	(July 26-30)	(August 2-6)
AM Classes (8:00am-12:00pm)	(July 12-16)	(July 19-17)	(July 26-30)	(August 2-6)
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(8:00am-12:00pm)		(July 19-17)  vailable to voluntee	,	(August 2-6)
(8:00am-12:00pm)  In total, how many Due to the number of o	/ <u>weeks</u> are you a	vailable to voluntee	er?	
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In total, how many Due to the number of o will be very limited. Which age groups Ages 5-7	/ <u>weeks</u> are you a classes being offered s would you be wi	vailable to voluntee I this year and the res illing to work with? Ages 8-12	er?trictions in place, volu Check all that app	inteer opportunities
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