

E.P.I.C. Agency Volunteer Request Form

1) Agency name: _____

2) Address: _____

City: _____ Zip Code: _____

3) Agency Phone # : _____

4) Contact person/Volunteer Coordinator: _____

5) Phone: _____ Ext. _____

6) Fax number: _____

7) E-mail address: _____

8) Website: _____

9) Agency days and hours of operation: _____

10) Best days/times to call: _____

11) Types of service(s) offered by your agency: (Check all that apply)

Educational Services

Legal & Public Services

Social Services

Medical Services

Other: _____

12) Please describe your agency objectives or mission statement. Who do you serve in your community?

13) Please describe the programs and services offered by your agency.

14) Please describe the volunteer(s) duties, expectation, training and required time commitment:

15) Please detail the procedures and policies covered in your orientation and in-service training? Where? When? How long?

16) Detail the type of background checks or certifications volunteers will need before volunteering? (TB, live scan, or fingerprinting) Who will cover these costs? Who should the volunteers contact for these services?

17) Will the volunteers need to meet with the site supervisor prior to beginning their service? How closely will the volunteers be supervised? Where do students check in on their first day?

18) Please list any risk(s) associated with placement within your agency (Inside and outside the facility). Risks should directly reflect those listed in the Learning Plan.

19) Please provide directions or attach a map of how to get to your agency from Cal State L.A. Also include any parking fees the volunteer might incur.

Please check one of the following:

Need volunteers on a continuous basis (All quarters)

Need volunteers seasonally (Check all that apply)

Fall Quarter: (September-December)

Winter Quarter: (January-March)

Spring Quarter: (April-June)

Summer Quarter: (June-September)

Requesting a specific one time volunteer

Student's Name: _____

.....**FOR EPIC USE ONLY**.....

Received By: _____

Date: _____

Area: _____