

Volunteer Worker Program Interest Card

Contact Information (Required information)				
Name:		(No.)		
Address:				
Phone Number				
E-mail address				
Locations				
(select location interested in volunteering)				
☐ Administration Office		290 N. D Street, San Bernardino CA 92415		
☐ East Valley AJCC		658 E. Brier Drive, #100, San Bernardino CA 92408		
☐ West Valley AJCC		9650 Ninth Street, Rancho Cucamonga, CA 91730		
☐ High Desert AJCC 17310 Bear		Valley Rd., Suite 109, Victorville, CA 92395		
General Information (Required information)				
How did you learn about the program?				
Why do you want to volunteer for the department?				
Are you currently enrolled or atterschool?		r attending	☐ Yes ☐ N	o If yes, where?
			☐ High School ☐ College ☐ Vocational	
Skills (Optional: Check all that apply)				
Microsoft Word Microsoft Excel Power Point				
		<u> </u>		
Adobe		Publisher		Information Mapping
U Other:				