

LEGAL AID WORKSSM
NON-LAWYER VOLUNTEER APPLICATION

Name: _____

Address: _____
street city state/zip

Phone #(s): _____ **E-Mail:** _____

U.S. Citizen: Yes No

Emergency Contact: _____
Name Address: Street #, City and State/Zip Phone/Cell

Please list two (2) personal references we can contact:

Name Email Address Phone Number

Name Email Address Phone Number

I would like to volunteer in the following office: Fredericksburg Culpeper Tappahannock

Volunteer Type: Law Student Paralegal Legal Assistant/Clerk J.D. Graduate

Please check the types of volunteer work that interest you:

- | | |
|---|--|
| <input type="checkbox"/> Answering telephones/Greeting clients | <input type="checkbox"/> Interviewing clients |
| <input type="checkbox"/> Telephone Intakes, entering data into computer | <input type="checkbox"/> Researching/Preparing cases for administrative hearings |
| <input type="checkbox"/> Walk-in intakes, entering data into computer | <input type="checkbox"/> Delivering documents |
| <input type="checkbox"/> Scheduling appointments | <input type="checkbox"/> Preparing legal documents (i.e. discovery) |
| <input type="checkbox"/> Faxing | <input type="checkbox"/> Running office errands |
| <input type="checkbox"/> Drafting/Filing pleadings | <input type="checkbox"/> Researching/Analyzing law sources |
| <input type="checkbox"/> Typing letters/envelopes | <input type="checkbox"/> Foreign Language interpreter:
Language _____ |
| <input type="checkbox"/> Copying/Filing files | |

How many hours per week can you volunteer? What day(s) and time(s) can you volunteer?

Why are you interested in volunteering for Legal Aid WorksSM?

Please sign and date below to certify that the information you have provided on this form is true to the best of your knowledge

Date: _____ Volunteer Applicant: _____
Signature (Application must be signed)

Date Interviewed: _____ Interviewer: _____ Accept Reject