



Volunteer Application Form

Thank you for your interest in volunteering with the Levana Gender Advocacy Centre!

Date: _____

Name: _____

Phone Number: _____ Email Address: _____

Can we leave confidential messages at your phone number? Yes No

What are your preferred gendered pronouns? _____

Are you:

- Full-time Undergrad Part-time Undergrad Queen's Alumni Staff
 Community Member Grad Student Other: _____

Describe your main reasons for wanting to volunteer: (Check all that apply)

- Desire to help others Interest in community involvement Gain experience & develop skills
 Establish work record & build resume Meet people & network
 Other (please specify): _____

Indicate the type of volunteer work that interests you: (Check all that apply)

- Advocacy and Referral Fundraising Presentations/Public Speaking
 Clerical/Administration Projects/Research
 Campaigning Special Events
 Social Media & advertising
 Community Engagement

Please indicate which working group you would be interested in joining (Check all that apply)

- Zine Library Feminist Movie Series Lunch-time Series
 Levana Book Library Men who Like Feminism Panels & Conferences
 Feminist Reading Group Muslim Feminism

Please fill out this application form to let us know how you would like to get involved. Note: Information given on this form will be kept confidential. You may choose not to answer some of these questions.

When would you be available to volunteer?

	Monday	Tuesday	Wednesday	Thursday	Friday
Morning					
Afternoon					
Evening					

What skills and experiences would you like to bring as a volunteer with the Levana Gender

Advocacy Centre? (Feel free to describe any interests, training, work, or volunteer experience that you believe would be relevant to the Centre):

What skills and experiences would you like to build-on while volunteering with the Levana Gender Advocacy Centre?

Is there anything you would like to share with us?

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