

Request Form for Volunteers

Agency Information Agency name: Phone number: (_____) _____ Fax: (____)____ Volunteer Contact Person: _____ E-mail: _____ **One-Time, Date-Specific Activity** Date: _____ Time: ____ Contact name: ____ Location: ______ Number of Volunteers Needed: _____ Description of need (list specific tasks and responsibilities): **On-Going Volunteers:** Date: _____ Time: ____ Contact name: ____ Location: Number of Volunteers Needed: _____ Description of need (list specific tasks and responsibilities): **Volunteer Training** Is training required? _____ Yes _____No Where/When?: _____

Please Mail/Fax this from to:

Volunteer Center, P.O. Box 305069, Denton, Texas 76203

Phone (940) 565-3021* Fax: (940) 369-8440

E-mail: volunteercenter@dsa.admin.unt.edu