

Scottsdale Artists' School
3720 North Marshall Way
Scottsdale, AZ 85251
(480) 990-1422

Volunteer application

NAME _____ DATE _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ CELL PHONE _____

E-MAIL _____

WHY DO YOU WANT TO VOLUNTEER AT SAS? _____

EMPLOYMENT HISTORY _____

EDUCATION _____

RELEVANT VOLUNTEER EXPERIENCE

ORGANIZATION _____ ASSIGNMENT _____

ORGANIZATION _____ ASSIGNMENT _____

If you are currently a student, please list where and status _____

Additional skills (please list relevant software and skill level) _____

Please contact me for the following opportunities: special events _____ clerical _____
 membership _____

Availability (please check all that apply)

Day	Alternate time	9–11:30am	11am–2:30pm	2–5pm	2:30–6pm	5–8pm
Monday						
Tuesday						
Wednesday						
Thursday						
Friday						
Saturday						
Sunday						

