

Intern/Volunteer Application

INSTRUCTIONS

E-mail completed application **AND** a copy of your resume to <u>volunteer@performingartsworkshop.org</u> or submit a hard copy of both documents to Performing Arts Workshop's administrative office (located at 1661 Tennessee St. Unit 3-O, San Francisco, CA 94107).

		te One time Event(s) v	oraniceer ronni ii	nstead. Thank you.	
ONTACT INFORMATION					
Name: Phone:		Date:			
		Address:	s:		
-mail:					
low did you hear about us?					
VAILABILITY					
How often are you looking to volunteer? Please check or			ne box: ☐ Other:		
or approximately how many h	ours?				
lease write the hours you are	available ea	ch day of the week. (E	Ex: Mon: 9am-3	pm, Tue: n/a)	
Monday 7	Tuesday	Wednesday	Thursday	Friday	
ROJECTS					
rojects: Please rank (1 st , 2 nd , &	3 rd) un to thi	ree projects that you o	are interested in	assisting with	
50 th Anniversary (specif		Financial Research & Analysis			
Classroom Photography		Grant Research & Development			
Classroom Videography			Program Data Support		
Community Engagement/Outreach			Social Media Development		
Donor Research, Trackir		Student Showcase (specify role below)			
E-server Organizing		Transcribing			
Fall/Spring Fundraising		Workshop History Archiving			
Specific Position/Notes?					



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Please list any specific talents, skills, or ho	obbies relevant to the project(s) selected above.
INTERESTS	
Why are you interested in working with P	erforming Arts Workshop?
What experience(s) have you had with the	e arts?
What are you looking to gain from volunt	eering with Performing Arts Workshop?
REFERENCES	
Please provide two professional reference	es:
1. Name:	Phone:
Job Title:	Relation:
2. Name:	Phone:
Job Title:	
OTHER	
Check the box below for more informatio	n on how to get your company involved:
☐ Get my company involved!	non now to get your company involved.
Anything else you wish to share?	