## SDSU Research Foundation WIC Program Site Volunteer Application

Date	
Your Contact Information	
First Name	Last Name
Home Address	
Phone Number	Alternate Phone Number
E-mail	
If you speak any language(s) other than English,	please list here:
Are you currently enrolled in a college or gradua	te level course?
Yes	
No No	
What is your field of study or area of interest?	

Which location are you applying for?

North Park - 3078 El Cajon Blvd, #100, San Diego, CA 92104

Chula Vista - 542 Broadway, Suite Q, Chula Vista, CA 91910

El Cajon - 321 Van Houten Ave., El Cajon, CA 92020

- Mira Mesa 10737 Camino Ruiz, Suite 135, San Diego, CA 92126
- Escondido 1131 E. Washington Ave, Suite K, Escondido, CA 92025

Are you able to commit to at least 6 months of volunteer work?

Yes No

What is your general availability?

Why would you like to volunteer at the SDSU Research Foundation WIC Program?

## References

First Name	Last Name
Relationship	
E-mail Address	Phone

First Name		Last Name
Relationship		
E-mail Address	Phone	
First Name	]	Last Name
Relationship		
E-mail Address		Phone
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This application is good for 90 days. You may reapply after 90 days. We will contact you when an opening becomes available.

By submitting this form, you agree that all information provided are true to the best of your knowledge.