

LEGAL AID SOCIETY OF THE ORANGE COUNTY BAR ASSOCIATION, INC.

100 East Robinson Street, Orlando, FL 32801

Telephone: (407) 841-8310 Fax: (407) 843-9713

Volunteer Interviewer Application

Name: _____
Last First Middle

Address: _____
Street

City State Zip Code

Phone: _____
Home Work Other (specify)

Education: High School _____ College _____ Graduate _____ (Specify the number of years completed.)

Are you currently a student? Yes No If yes, where? _____

Have you ever been convicted of a felony? Yes No If yes, please state when and the offense:

How did you learn of Legal Aid Society Volunteer Program? _____

Have you ever been a volunteer? Yes No If yes, please answer the following:

For what agency? _____ For how long? _____

Are you presently at any other agency? Yes No If yes, please answer:

For what agency? _____ For how long? _____

Are you currently employed? Yes No Where? _____

Position: _____

List any foreign language you read, speak and write: _____

List two current local references (not relative) who have known you at least two years:

Name: _____ Name: _____

Address: _____ Address: _____

Phone: _____ Phone: _____

Person to contact in case of emergency: _____ Phone: _____

I wish to assist the Legal Aid Society of the Orange County Bar Association, Inc. as a volunteer because:

It is understood that I will be offering my services to the Legal Aid Society of the Orange County Bar Association as a Volunteer Interviewer without compensation and without rights to health benefits in case of injury.

Signature Date