# Student Volunteer Application

**Office of Service Learning**

**PLEASE RETURN TO**

**SERVICE LEARNING OFFICE AT ST. JOSEPH ANNEX FIRST FLOOR**

**ONCE COMPLETED**

897-8658

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## Volunteer Information

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First</th>
<th>M.I.</th>
<th>Date</th>
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<table>
<thead>
<tr>
<th>Street Address</th>
<th>Apartment/Unit #</th>
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<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>ZIP</th>
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<table>
<thead>
<tr>
<th>Phone</th>
<th>Cell</th>
<th>E-mail Address</th>
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<tr>
<th>Intended Date of Graduation</th>
<th>Academic Major</th>
<th>Academic Advisor</th>
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## Are You Completing This for Service Learning Credit?  
[ ] YES  [ ] NO

(IF YES, complete this section below, if NO, skip to the next section)

<table>
<thead>
<tr>
<th>Service Learning Class</th>
<th>Instructor</th>
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Did you receive a copy of the Service Learning Class Syllabus?  
[ ] YES  [ ] NO

Did you understand the academic components of the course?  
[ ] YES  [ ] NO

Did you receive the following documents?  
- Community Service Partnerships  [ ] YES  [ ] NO
- Service Learning Agreement  [ ] YES  [ ] NO
- Service Learning Hour Summary Log  [ ] YES  [ ] NO
- Service Learning Assessment  [ ] YES  [ ] NO

**Nursing Students Only:**

I plan to:

- [ ] Complete my 20 hours of service at one site  
  Agency: ____________________________

- [ ] Complete my 20 hours of service in a variety of ways  
  Explain: ____________________________________________________________

- [ ] Complete my 20 hours of service working on a special project or initiative  
  Project Description: ____________________________________________

  ________________________________________________________________
  ________________________________________________________________
  ________________________________________________________________

My instructor has approved this plan:  [ ] YES  [ ] NO

## Availability - Please Provide Time Ranges in the Boxes

<table>
<thead>
<tr>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
<th>Saturday</th>
<th>Sunday</th>
</tr>
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<tbody>
<tr>
<td>Time Ranges</td>
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## Past Volunteer and Employment Experience

<table>
<thead>
<tr>
<th>Institution Name</th>
<th>Position Held</th>
<th>Dates</th>
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GENERAL INTERESTS

Please provide any details about what your interests are as they might relate to a service experience?

VOLUNTEER ASSIGNMENT INTERESTS

Below are a list of our current official Community Service Partnerships. Please consult our Community Service Partnership flyer for more information about each. If completing service for Service Learning, your instructor may have indicated which sites would be more appropriate for their class. Please indicate the ones that you are interested in and your priority (1,2,3 etc.) Nursing students who are engaging in special projects can skip this section.

☐ 21st Century Community Learning Centers
☐ Ann Marie House
☐ Big Brothers Big Sisters of Greater Nashua
☐ Boys and Girls Club of Nashua
☐ The CareGivers, Inc.
☐ Girls Inc. of Greater Nashua
☐ Harbor Homes
☐ Hunt Community
☐ Marguerite’s Place
☐ Nashua Police Athletic League
☐ Nashua Soup Kitchen
☐ PLUS Company
☐ Salvation Army
☐ TV 13 Nashua
☐ Please contact me I am not sure or I have questions on a site.
  Details

SIGNATURE

I agree to act in a professional manner while representing Rivier College as a volunteer within the community. I will maintain confidentiality, dress appropriately and act with a professional demeanor. I will report any areas of concern with my service site to the Service Learning Office immediately.

Signature

Date

PLEASE NOTE:

Return this application to the Service Learning Office in St. Joseph Annex First Floor. Once completed, the office will contact you with the referral information for your service site. Please do not contact the agency directly without first receiving the referral from the Service Learning Office. If you have any questions at any time or do not hear back from the Service Learning Office within one week, please contact them at 897-8658

Internal Use Only:
Referral:__________  Date:__________  Confirm:__________