

**BUDDY & date assigned:**

## MIGRANT ENGLISH PROJECT

### Volunteer Application Form

Date:	
Name:	
Telephone number:	
Email:	Would you like to be added to our email list?: Yes / No

Where did you hear about the Migrant English Project?

Why are you interested in volunteering for the MEP?

In what capacity would you like to volunteer for the Migrant English Project (e.g. teaching, coordination, general help, cooking)?

How long would you like to, or can you, volunteer for (if for limited time)?

How regularly are you able to volunteer (e.g. once a month, every week)?

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Do you have any commitments and/or health issues that might affect your attendance and/or ability to carry out certain tasks (e.g. bad back: heavy lifting; children: cannot volunteer outside term-time, etc.)?

Please list any useful skills/previous experience (e.g. teaching & relevant qualifications, languages spoken, cooking, placement testing, welfare advice, etc.):