

Thoo Mweh Khee Migrant Learning Center

VOLUNTEER APPLICATION

PERSONAL INFORMATION

First Name:	Middle Name:	Last Name:								
Date of birth (dd/mm/yyyy): _		N	ationality: _							
EDUCATION AND QUALIFICATIONS										
Highest level of education:	high school sor	ne college	BA/BS	MA/MS	PhD/EdD/MD					
Major(s) studied:	Minor(s) studied:									
Language proficiencies:										
Teaching experience: none	e less than a yea	ar 1-3 y	ears (4-5 years	5+ years					
Levels taught: preschool	elementary school	high school	college	ESL othe	er					
Subjects taught:										
VOLUNTEER EXPERIENCE										
Name of organization:										
Role:	Dates	volunteered:								
Reason for leaving:										
Name of organization:										
Role:	Dates	volunteered:								
Reason for leaving:										
Name of organization:										
Role:	Dates	volunteered:								
Reason for leaving:										

SPECIAL SKILLS									
REFERENCES (please provide 3 p	rofessional references	that are not related	d to the applicant)						
Name:	Organization: _		Email:						
Relationship to applicant:	supervisor	professor	religious leader	other					
Name:	Organization: _		Email:						
Relationship to applicant:	supervisor	professor	religious leader	other					
Name:	Organization: _		Email:						
Relationship to applicant:	supervisor	professor	religious leader	other					
AVAILABILITY Length of desired volunteer Desired start date: OTHER Please include any other inf				2 years	3+ years				
I,	, attest t								
SIGNATURE:			DATE:						