

Palatine SeniorNet Learning Center
VOLUNTEER APPLICATION No. _____

Date: _____

I. Volunteering for: Coach _____ Instructor _____

II. Name: _____ Date of Birth: _____

Address: _____

City/State/Zip: _____ Phone: _____

Age: Under 55 _____ 50 or older _____ Retired? _____ Still Working? _____

III. Computer skills:

Own a personal computer? _____ Years used a personal computer? _____: Win95/98/ME? _____

Win XP? _____ Vista? _____ Other?: _____

Modem? _____ Online? _____: E-mail address? _____

Brief description of equipment (if owned): _____

Computer Courses taken: _____

When? _____ Where? _____

IV. Teaching background: Never taught before _____ Taught computers _____

Taught other subjects _____

Reason for wanting to volunteer: _____

VI. Availability for teaching. Please note that you must be available for teaching during two different time periods. However, you will only be expected to teach during a single time period.

Circle at least two times.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Morning	M	M	M	M	M	M
Afternoon	A	A	A	A	A	A
Evening	E	E	E	E	E	E

Signature _____

VII. Palatine SeniorNet Learning Center
 Learning Center Manager

Education Coordinator:

 Signature

 Date

 Signature

 Date