



Survivors Healing Center

A Welcoming Place for Survivors of Child Sexual Abuse and Their Supporters

Volunteer / Intern Application

Name:	_____	Occupation:	_____
Address:	_____	School:	_____
	_____	Major:	_____
	_____	Year:	_____
Home Tel:	_____	1 st Language:	_____
		2 nd Language:	_____
Work Tel:	_____	DOB:	_____
Other Tel:	_____	<u>Optional</u>	
Email:	_____	Gender:	_____
		Ethnicity:	_____

1. Where did you learn about the center and the volunteer opportunities? (friend, newspaper...)
2. Past Volunteer / Work Experience that you would like to share (you may attach a resume):
3. Skills or interest: (work well with teens, office skills, grant writing)
4. Availability (please be as specific as possible):
Starting _____ to _____ Days of the Week: _____
Time: _____
5. Main source of Transportation: (Car, bus.....):

6. Are You Willing to commute to Watsonville: Yes No
7. Why are you interested in volunteering at SHC? (education, community work.....)
8. Do you have any personal connection to the issue of Child Sexual Abuse? (optional)
9. Please describe briefly your understanding of what is Child Sexual Abuse?
10. Describe your experience and ability to work with a wide range of populations including low income men and women, Latino community, gays and lesbians and people with disabilities.
11. Do you have any special need that we should know about in order to better accommodate you at our center? (optional)

**PLEASE RETURN APPLICATION TO:
2301 MISSION ST. , SUITE C-1, SANTA CRUZ CA, 95060**
