

Camp Zavarian Volunteer Application / Summer 2020

Name: _____

Address: _____

Email: _____ Facebook Account? Yes No

Phone # (cell): _____ Emergency #: _____

School Name: _____ Grade: _____

Hobbies: _____

Strengths: _____

Weaknesses: _____

Availability Schedule:

At Minimum, Volunteer Shifts are from 10:00AM to 1:00PM or 1:00PM to 4:00PM. You are welcome to stay longer.

Wk	Date	Mo	Tu	We	Th	Fri	Available Hours*
1	6-14 to 6-18	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> AM <input type="checkbox"/> PM <input type="checkbox"/> N/A
2	6-21 to 6-25	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> AM <input type="checkbox"/> PM <input type="checkbox"/> N/A
3	6-28 to 7-2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> AM <input type="checkbox"/> PM <input type="checkbox"/> N/A
4	7-5 to 7-9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> AM <input type="checkbox"/> PM <input type="checkbox"/> N/A
5	7-12 to 7-16	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> AM <input type="checkbox"/> PM <input type="checkbox"/> N/A
6	7-19 to 7-23	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> AM <input type="checkbox"/> PM <input type="checkbox"/> N/A
7	7-26 to 7-30	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> AM <input type="checkbox"/> PM <input type="checkbox"/> N/A
8	8-2 to 8-6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> AM <input type="checkbox"/> PM <input type="checkbox"/> N/A

- A training session will be announced soon and every volunteer has to participate in this session
- You need to sign in every time you walk into the campus. Your community service hours will be given at the end of camp. Camp dates are June 15th-August 6th.
- Volunteer coordinator is Nora Chitilian-Keleshian, you need to call her if you have a change of scheduling at (818) 634-1063 one day in advance. E-mail is: norachk@hotmail.com
- You are asked to be at your best behavior during camp volunteer times as you are working with children. NO use of bad words and no use of electronics allowed during camp times. Camp Zavarian has the right to terminate you if you violate camp rules.

Volunteer Agreement Signature: _____

Signature of Parent or Guardian consenting to applicant serving as a volunteer:

Name/Phone: _____ Signature: _____