



**Literacy Council  
of Northern Virginia**

**Volunteer Profile | Family Learning Program and ESOL Learning Centers**

Date form completed: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Title: \_\_\_\_ First name: \_\_\_\_ Middle initial: \_\_\_\_ Last name: \_\_\_\_ Suffix: \_\_\_\_

Street address 1: \_\_\_\_ Street address 2: \_\_\_\_

City: \_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_

E-mail address: \_\_\_\_

Home phone: \_\_\_\_ - \_\_\_\_ - \_\_\_\_ Work phone: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Cell phone: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

I prefer to be contacted via:  home phone  work phone  cell phone  e-mail

Date of birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Gender:  Male  Female

Tax jurisdiction:  Alexandria City  Arlington County  Falls Church City  Fairfax  Other

Are you currently employed?  Yes  No Employer: \_\_\_\_\_

Ethnicity:  Native American/Alaskan  Black, Non-Hispanic  Asian/Pacific Islander  Hispanic  
 White, Non-Hispanic  Native Hawaiian  Middle Eastern  Other  Prefer not to say

What languages do you speak? Native language \_\_\_\_\_

Other spoken 1 \_\_\_\_\_ Other spoken 2 \_\_\_\_\_ Other spoken 3 \_\_\_\_\_

Level of education:  Less than HS diploma or equivalent  HS diploma or equivalent  Associates degree  
 Bachelors degree  Masters degree  Doctorate degree

How did you hear about the Literacy Council of Northern Virginia? \_\_\_\_\_

**General availability:**

Location (check all that apply)  Alexandria (Lincolnia/Mark Center)  Alexandria (Rt. 1 corridor)  Falls Church  
 Herndon  Lorton  Reston  Springfield

**Days and times**

<b>Monday</b>	<b>Tuesday</b>	<b>Wednesday</b>	<b>Thursday</b>	<b>Friday</b>	<b>Saturday</b>
Morning <input type="checkbox"/>	Morning <input type="checkbox"/>	Morning <input type="checkbox"/>	Morning <input type="checkbox"/>	Morning <input type="checkbox"/>	Morning <input type="checkbox"/>
Evening <input type="checkbox"/>	Evening <input type="checkbox"/>	Evening <input type="checkbox"/>	Evening <input type="checkbox"/>	Evening <input type="checkbox"/>	Afternoon <input type="checkbox"/>

**A description of all classroom-based opportunities is attached. Please indicate which volunteer positions you are interested in. (check all that apply)**

- Family Learning Program teacher  Family Learning Program class aide
- Family Learning Program children's room aide  ESOL Learning Centers Program teacher
- ESOL Learning Centers Program class aide  Substitute teacher  Computer lab aide
- Student Assessment Specialist  Registration assistant

In addition to classroom teaching opportunities, I am also interested in learning more about other volunteer positions at the Literacy Council.

**List current or previous volunteer experience, if any:**

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**List any special skills, hobbies or interests:**

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**Why are you interested in volunteering for the Literacy Council?**

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**For administrative use only**

Position: \_\_\_\_\_

Site: \_\_\_\_\_ Day & Time: \_\_\_\_\_

Comments:

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