



Application to Volunteer for BCA

Name: _____

Home Phone number: _____ Cell: _____

Address: _____

Email address: _____

Is AZ your primary residence? Yes No

1. Why do you think you might be interested in volunteering for the Border Community Alliance?

2. Briefly list other volunteer positions you have held or currently hold.

3. What skills/abilities do you have to contribute?

Spanish language (Indicate level of fluency: Fair Good Excellent)

- | | |
|-----------------------|---------------|
| Photography | Data Entry |
| Social media | Writing |
| Office receptionist | Marketing |
| Organizational skills | Fundraising |
| People skills | Grant writing |

Other (list):

Signature: _____ Date: _____

Thank you for your interest in volunteering for BCA. An interview will complete your application.

FOR OFFICE USE:

Date Received: _____ Date of Interview: _____

Coordinator notes:

Recommendation:

Referred to:

1. _____

Date: _____

2. _____

Date: _____

3. _____

Date: _____

Please return this application via email to: **info@bordercommunityalliance.org**

or mail to: Border Community Alliance
P. O. Box 1863
Tubac, AZ 85646

For more information about BCA, visit our website at:
www.bordercommunityalliance.org
Email: **info@bordercommunityalliance.org**
Telephone: **(520) 419-1960**