



WOMEN'S FUND *of* OMAHA

Volunteer Interest Indicator

Name: _____ Date: _____

Company Name: _____ Title: _____

Business Address: _____

Home Address: _____

Referred By: _____ Approximate Percentage of Time You Travel: _____

Home Phone: _____ Cell Phone: _____ Business Phone: _____

Fax: _____ E-mail: _____

Skills: _____

Awards, Recognitions: _____

Current Community Board/Volunteer Commitments: _____

Past Community Board/Volunteer Experience: _____

Hobbies, Interests: _____

Why would you be interested in a volunteer position with the Women's Fund?

Do you have a particular area of interest regarding women's issues? _____

Hours available per month to volunteer for the Women's Fund: _____

Best time of day: Early AM Noon After 5 PM Flexible Other

I would be interested in serving on the following committee(s):

Communications Grants Special Projects & Task Forces Planning
 Research Fundraising/Events Human Resources Finance

Signature: _____ **Date:** _____

*Please complete this form and return to:
Women's Fund of Omaha, 7602 Pacific Street, Suite 300, Omaha, NE 68114-5405
or Fax to 402-827-9283*