

**Please fill this out and submit to the following address if you are interested in receiving more information about volunteer opportunities at Lee's Place.**

**Lee's Place**  
**Volunteer Information Form**

Name \_\_\_\_\_ Age \_\_\_\_\_

Phone \_\_\_\_\_ E-mail Address \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Birthday \_\_\_\_\_

Place of Employment/ Position \_\_\_\_\_

School Attended \_\_\_\_\_ Major \_\_\_\_\_

How did you hear about Lee's Place? \_\_\_\_\_

Why do you want to volunteer? \_\_\_\_\_

\_\_\_\_\_

What experience/ skills do you have that might be relevant? \_\_\_\_\_

\_\_\_\_\_

Anything else you would like to add \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

It is only through the eyes of others do you see yourself. It is only through the work of your own do you find the difference in others.

Please mail to  
Amanda Arrant  
Lee's Place 216  
Lake Ella Dr.  
Tallahassee, FL 32303