



**Las Americas**  
Immigrant Advocacy Center  
1500 E Yandell, El Paso, TX 79902  
(915) 544-5126, Fax: (915) 544-4041  
www.las-americas.org

## VOLUNTEER APPLICATION

Date:

Name:

Address:

City:

State:

Zip:

Phone (Home):

(Cel):

(Work or School):

Email Address:

Address while in El Paso:

Phone while in El Paso:

Do you have a vehicle? Yes No

Can you drive? Yes No (You will be asked to provide a driver's license and proof of insurance)

### **Emergency Contact:**

Name:

Phone:

Relationship:

In El Paso, Name:

Phone:

Relationship:

### **Background:**

I am an immigration lawyer. Years of experience:

I am a lawyer. Specialty:

I am a paralegal. Experience:

I am a law student. School:

Year:

I am a pre-law student. School:

Year:

I am a college student. Major:

School:

Year:

I am a former Las Americas client

I am affiliated with a group. Group:

I am a community member

Other. Explain:

**Is this a school clerkship/internship or project?**

Yes

No

If yes, please give the name, email and phone number of supervising professor or administrator:

**Are you currently employed and where?**

**Availability**

- Winter break. Dates:
- Spring semester. Dates:
- Spring break. Dates:
- Summer internship. Dates:
- Year-long. Start date:
- Other. Explain:

**Hours**

How many hours can you commit to working at Las Americas, per week?

**Schedule:**

- Mon. morning  Tue. morning  Wed. morning  Thur. morning  Fri. morning
- Mon. afternoon  Tue. after.  Wed. after.  Thur. after.  Fri. after

**How did you hear about Las Americas?**

- Media  Friends  Internet  Other:

**Areas of interest:**

Please check the ones you are interested in.

- Immigration work: Refugees/Asylum seekers
- Immigration work: Battered women and victims of crime
- Immigration work: Unaccompanied minors
- Immigration work: Family-based immigration
- Education and advocacy
- Fundraising/grant writing
- Administrative
- Accounting/bookkeeping
- Communications
- Web
- Other

**Tasks:**

Please check the tasks you'd be willing and able to perform:

- |  |   |
|--|---|
| <input type="checkbox"/> Data input                          | <input type="checkbox"/> Client intake                    |
| <input type="checkbox"/> Outreach presentations (in Spanish) | <input type="checkbox"/> Client interview                 |
| <input type="checkbox"/> Answering phones                    | <input type="checkbox"/> Detention center visits          |
| <input type="checkbox"/> Photocopying/organizing files       | <input type="checkbox"/> Filling immigration forms        |
| <input type="checkbox"/> Teaching English/Civics             | <input type="checkbox"/> Assisting with trial preparation |

*Las Americas – Volunteer Application (4 pages)*

- Research
- Brief and memorandum writing
- Tech work/graphic design
- General office work

- Construction/maintenance
- Client counseling
- Other

**Skills:**

Languages spoken:

Computer skills:

Others:

**Motivation:**

Have you volunteered before? Where?

Why do you want to volunteer at Las Americas?

What other organizations/agencies have you applied to?

What will you bring to Las Americas?

What do you hope to get out of the experience?

What are your long-term career plans?

**Experience:**

Are you, or have you been employed by an agency that provides services or prosecutes immigrants? If yes, what agency, in what capacity and when?

Are you, or have you been working with victims of domestic violence or child abuse? If yes, what agency, in what capacity and when?

**References:**

Please give the following information for up to three people who know you personally or professionally: Name, affiliation, address, telephone, email, relationship.

- 1.
- 2.
- 3.

**Clearance:**

Are you willing to sign a confidentiality agreement to protect Las Americas' clients' confidentiality? Yes No

Are you willing to submit to a mandatory criminal background check? Yes No

If yes, have you ever been convicted of a criminal offense, are there felony charges pending against you, or have you ever been charged with neglect, abuse, or assault? Yes No

If yes, specify \_\_\_\_\_

Social Security # \_\_\_\_\_

**\*\*Office Use Only\*\***

Date Received \_\_\_\_\_ Background Check Date \_\_\_\_\_ Provided copies of DL & proof of vehicle insurance Date \_\_\_\_\_

Signed Confidentiality Agreement Date: \_\_\_\_\_ Signed Volunteer Agreement Date: \_\_\_\_\_

References Received Date \_\_\_\_\_ Orientation Date \_\_\_\_\_

Volunteer position \_\_\_\_\_ Date Start: \_\_\_\_\_ Staff initial \_\_\_\_\_

nd:11/17/10