



Alaska Center

FOR THE BLIND AND
VISUALLY IMPAIRED

Equipping Alaskans who are blind and visually impaired with skills for success in life and work.

3903 Taft Drive, Anchorage, AK 99517-3069 • (907) 248-7770 • Toll-free 1 (800) 770-7517 • Fax (907) 248-7517 •

www.AlaskaBVI.org

Volunteer Application

Thank you for your interest in volunteering. Please complete this form and return it to the Center (see the bottom of this page). We will follow up with you about next steps.

Your Information

Full name _____

Mailing address _____

City, State, ZIP _____

Phone _____

Email _____

Today's date _____

Areas of Interest (check all that apply)

- Community Events Team
- Youth Programs Team
- Older Blind Support Team
- Administrative Support Team
- Greenhouse and Garden Team
- Donor Relations and Community Engagement Team
- Facilities and Maintenance Team
- Special Projects Team

Availability and Commitment

Preferred level (check one):

- Community Volunteer (one-time events and projects)
- Program Volunteer (monthly or seasonal)
- Weekly Volunteer (regular weekly schedule)
- Team Lead (coordinates a team)

Skilled Volunteer (specialized or professional expertise)

Days and times you are generally available _____

Earliest start date _____

Skills, Experience, and Interests

Emergency Contact

Name _____

Phone _____

References (please list two)

1. Name / relationship _____

Phone _____

2. Name / relationship _____

Phone _____

For Transportation Roles Only

Volunteers who transport clients must hold a valid driver's license and current automobile insurance, and complete any required screening.

I hold a valid driver's license and current automobile insurance.

Screening Consent and Acknowledgment

Roles involving direct client contact require a background check appropriate to the role. By signing below, I consent to any screening required for the role I am seeking, and I agree to follow the Center's volunteer code of conduct and to keep client information confidential.

Signature _____

Date _____

Return your completed application by email to info@alaskabvi.org, by mail to 3903 Taft Drive, Anchorage, AK 99517-3069, or in person at the Center. Questions? Call (907) 248-7770.