

## VOLUNTEER APPLICATION

PERSONAL INFORMATION		
Name	<input type="text"/>	
Mailing Address	<input type="text"/>	<input type="text"/>
	Street/PO Box	Suburb Post Code
Email	<input type="text"/>	Phone <input type="text"/>
Emergency Contact	<input type="text"/>	<input type="text"/>
	Name	Relationship Contact No.
<p><b>Health/Disability:</b> Please explain if you have any health concerns or disabilities that the Women's Law Centre needs to be aware of in order to support you in your role.</p> <input type="text"/>		

VOLUNTEER STATUS	
I am a:	
<ul style="list-style-type: none"> <li> <b>Student</b>            Currently attending year <input type="text"/> at <input type="text"/>            Currently studying <input type="text"/>            Currently in my <input type="text"/> year of university, studying <input type="text"/> </li> </ul>	
<ul style="list-style-type: none"> <li> <b>Law Graduate seeking GDLP placement</b> </li> </ul>	
<ul style="list-style-type: none"> <li> <b>Solicitor</b>            Currently employed by <input type="text"/>            Areas of legal expertise <input type="text"/>            Year of admission <input type="text"/> I have a current WA Practising Certificate: Yes <input type="checkbox"/> No <input type="checkbox"/> </li> </ul>	
<ul style="list-style-type: none"> <li> <b>Other (please explain)</b> <input type="text"/> </li> </ul>	

## GENERAL VOLUNTEER INFORMATION

I am available to volunteer:

Monday    Tuesday    Wednesday    Thursday    Friday

From:					
To:					

I have enclosed with my application:

A copy of my résumé

Two referees

A copy of my practising certificate

**Why do you want to volunteer with us?**

*Please explain below why you wish to volunteer with our organisation. Your answer might include details such as what issues you are concerned about, what areas you wish to learn more about, what areas you wish to gain experience in, that volunteering with an organisation is an essential part of your study, ways you feel you may be able to contribute to our centre, or any other details that capture why you wish to volunteer with us.*

**Please return to:**

**By post:** The Women's Law Centre of WA, PO Box 3182, Perth WA 6832

**By fax:** 08 9272 8866

**By email:** [info@wlcwa.org.au](mailto:info@wlcwa.org.au)