

# INTERNATIONAL CENTER STUDENT VOLUNTEER INFORMATION

DATE: \_\_\_\_\_

NAME \_\_\_\_\_ PHONE \_\_\_\_\_ EMAIL: \_\_\_\_\_

ADDRESS \_\_\_\_\_

SPECIAL INTERESTS (Major, language skills, hobbies, previous experience with internationals)

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\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_ ORIENTATION COUNSELOR PROGRAM, FALL

\_\_\_\_ CONVERSATION PARTNERS

\_\_\_\_ INTERNATIONAL EDUCATION WEEK COMMITTEE TO HELP WITH THE NOVEMBER EVENTS

\_\_\_\_ ASSIST IN SPECIAL EVENTS (INTERNATIONAL CENTER RECEPTIONS)

\_\_\_\_ ESCORT VISITORS AND GROUPS AROUND CAMPUS

\_\_\_\_ ANSWER PHONES IN OFFICE AND HELP WITH RECEPTIONIST DUTIES WHEN STAFF MEMBERS ARE AT MEETINGS OUTSIDE OF THE OFFICE

*ADDITIONAL COMMENTS* \_\_\_\_\_

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