

PARENT VOLUNTEER APPLICATION

Parent/Guardian Name: _____

Student's Full Name, Graduation Year, Hofstra ID: _____

Relation to Student: _____

Parent Street Address: _____

City, State, Zip: _____

Phone Number: _____

E-mail Address: _____

Your Occupation: _____

Position/Title: _____

What motivates you to become our parent volunteer? What do you expect from volunteering?

Please select opportunities below for which you would like to volunteer:

- Family Weekend (fall): Event Greeter
- Admitted Student Days (Feb.-May): Event Greeter
- Parent Orientation (Summer and Winter): Event Greeter
- Move-In Day (August): Event Greeter
- Host Regional Receptions (subject to approval process)
- "Parent Voice" Writer: Submit your articles for our *Family Connection* newsletter
- Provide internships/jobs to Hofstra students
- Call other parents during Annual Fund (fall)
- Join Parent Council (subject to approval process)

Signature _____

Date _____