



# Volunteer Consultant Application

## Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

\_\_\_\_\_  
*City State ZIP Code*

Phone: \_\_\_\_\_ Email \_\_\_\_\_

Days Available:

- Monday AM     Tuesday AM     Wednesday AM     Thursday AM     Friday AM     Saturday AM     Sunday AM
- Monday PM     Tuesday PM     Wednesday PM     Thursday PM     Friday PM     Saturday PM     Sunday PM

## Education

High School: \_\_\_\_\_

Did you graduate?    YES     NO     Diploma: \_\_\_\_\_

College: \_\_\_\_\_

Major: \_\_\_\_\_    Minor: \_\_\_\_\_

Graduate: \_\_\_\_\_

Major: \_\_\_\_\_    Minor: \_\_\_\_\_

Please select which support you are interested in providing:

- Register Business w/ Secretary of State
- Applying for FEIN
- Square (CC)Set up
- Logistics
- Hiring
- Logo Design
- Business Card Design
- Menu Design
- Social Media Set up and Plan
- Financial Modeling

## Experience

*Please provide description of relative experience Consulting Opportunity*

Company: \_\_\_\_\_

Responsibility: \_\_\_\_\_

Skills Acquired: \_\_\_\_\_

Company: \_\_\_\_\_

Responsibility: \_\_\_\_\_

Skills Acquired: \_\_\_\_\_

## Disclaimer and Signature

*I certify that my answers are true and complete to the best of my knowledge.*

*If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_