

CCWA VOLUNTEER INFORMATION SHEET

Cleveland Council on



I am interested in volunteering in the following areas:

(Please check all that apply)

Public Programs

___ Public Lecture Volunteer

___ Young Professionals Volunteer

Office Volunteer ___

Other Assistance ___

International Visitors Program

___ Visitors Programmer

___ Volunteer Driver

___ Home Hospitality Host

Dinner ___ Overnight ___

At my place of Business ___

General Information:

Name _____

Spouse _____

Home Address _____

City & Zip _____

Home Phone _____

Fax _____

Profession _____

Employer _____

Work Address _____

City & Zip _____

Work Phone _____

Fax _____

Email _____

Cell Phone _____

Organizations, clubs, affiliations: _____

Languages, other than English—please indicate fluency

Countries you have visited frequently or lived in for an extended period

For those interested in Home Hospitality or Overnight Homestay Host

Language or geographical areas from which you would prefer to receive guest:

Language or geographical areas from which you rather NOT receive guest:

Do you prefer? (circle all that apply) Male guest Female guest No preference

Smoking preferences? OK Outside home only Prefer not Strongly object

If you have children at home, what are their birthdates? (Year) _____

International visitors often feel more secure in pairs. Would you accept multiple guest?

Yes No

Would you accept an international visitor (accompanied by a professional interpreter) if s/he does not speak any of the languages you speak? Yes No

For more information contact CCWA at (216) 781-3730 or mail form to: