



United Way
of Greater Waterbury

UNITED WAY OF GREATER WATERBURY 2007 ALLOCATION VOLUNTEER APPLICATION

Please clearly print all information

Name _____ Phone _____ Fax # _____

Home Address _____ Zip Code _____

Business/Company Name _____ Title/Position _____

Business Address _____ Zip Code _____

Business Phone _____ Business Fax _____

Email _____

Please indicate mailing preference **Business** **Home**

PREVIOUS EXPERIENCE

Have you served on an Allocation Panel before? Yes No

If Yes, how many years were you an allocation volunteer? _____

Which panel(s)/agencies did you participate with? _____

PREFERENCE for 2007 PANEL (indicate by using 1 = first choice, 2 = second choice, etc.)

Increasing Self-sufficiency Health/Wellness/Safety Strengthening Families Supporting Older People

Basic Needs Nurturing Children and Youth No preference

United Way will try to honor all requests if possible.

AGENCY AFFILIATIONS

List below all human service agencies, with which you have or had an affiliation (Example: Board member, volunteer, staff, consumer.) This will help us assess a potential conflict of interest with panel assignment.

Agency Name	Affiliation/Position	Dates

EXPERIENCE/INTEREST

Please check below those areas in which you have experience or interest. This will be helpful as we begin to organize Allocation Panels.

Accounting/Finance Management/Administration Medical/Clinical

Community Planning Law Enforcement/Legal Statistical Analysis

Social/Human Services Program Evaluation Other

Return to: the United Way of Greater Waterbury, PO Box 2688, Waterbury, CT 06723 or Fax to 203-757-0867 or email to joann.rbalanda@ctunitedway.org Call JoAnn Reynolds-Balanda at 203-757-9855, x16 for more information.