Agency Information

Date: __________________________
Agency Name: ________________________________
Address: ______________________________________
Phone number: __________ Fax: __________ Email: __________
On a bus route: __________ Which one: __________

☐ One-Time, Non-Date Specific Activity (for example: individual or group needed for offices tasks, or leaflet/poster distribution.)
Contact Name: ________________
Description of need (list specific tasks and responsibilities and approximate number amount of time):

☐ One-Time, Date-Specific Activity (for example: individual or group needed for event such as Ithaca Festival.)
Date(s) ________________ Time(s) ________________
Contact Name: ________________
Description of need (list specific tasks and responsibilities):

☐ Ongoing Volunteers
Starte date: ________________ Contact Name: ________________________________
Description of need (list specific tasks and responsibilities):

Skill Area: ☐ Animals ☐ Clerical ☐ Computer ☐ Construction ☐ Languages ☐ Research ☐ Other: __________

Is training required? ☐ Yes ☐ No
Where/When:

Please mail, fax, or email this form to:
Public Service Center
200 Barnes Hall, Ithaca, NY 14853
Phone: 607.255.1148
Fax: 607.255.9550
Email: cupsc@cornell.edu