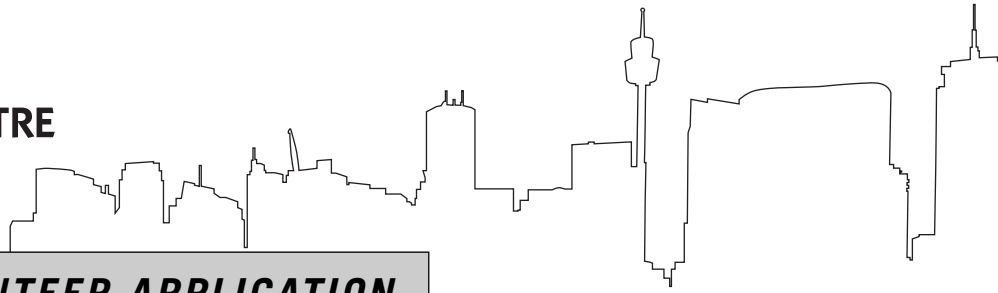


ICLC

INNER CITY LEGAL CENTRE



LAW STUDENT VOLUNTEER APPLICATION

Name: _____

Address: _____

Contact phone number(s): _____

Email: _____

Qualifications: *(Include the name and stage of the course currently being studied and previous degrees.)* _____

Work and/or Volunteer Experience: _____

Do you speak any other languages? (If yes, please specify.) _____

Do you have any particular areas of interest? _____

Which particular time slot are you prepared to commit yourself to?

Monday 9am - 1pm

2pm - 5pm

Tuesday 9am - 1pm

2pm - 5pm

5pm - 8pm

Wednesday 9am - 1pm

2pm - 5pm

5pm - 8pm

Thursday 9am - 1pm

2pm - 5pm

Friday 9am - 1pm

2pm - 5pm

Date: _____

Signature: _____