

University of Rochester
Wilson Day 2009 Community Service Project Application

Name of Agency: _____

Mailing Address: _____

Service Site Address: _____

Primary Contact Name: _____ Phone: _____

E-Mail: _____

On-Site supervisors (one for every 20 students).

Name: _____ Phone: _____

Name: _____ Phone: _____

Name: _____ Phone: _____

Total number of volunteers needed at site: _____

Please propose project(s) with a breakdown of volunteer duties, including the number of volunteers needed for each job.

Be sure to provide rain-plan suitable work indicated with an asterisk.

Materials needed for duties. Please mark what you can supply.

This year we are trying to utilize connections that have already been made between members of the University of Rochester community and local agencies. Let us know if there are any UR faculty, staff and/or clubs with whom you have built a relationship.

In addition, please attach information about your agency to this form to be used in the Wilson Day brochure so that we can accurately inform students about your site and future volunteer opportunities.

Please return this form no later than **July 15th** to:

Rochester Center for Community Leadership

Attn: Wilson Day
University of Rochester
510 Wilson Commons; CPU 270443
Rochester, NY 14627

Phone: (585) 275-8172
Fax: (585) 276-0151
tslater@mail.rochester.edu