



**COMMUNITY ACTION AGENCY'S PROSPECTIVE VOLUNTEER FORM**

**First Name:** \_\_\_\_\_

**Last Name:** \_\_\_\_\_

**Street Address:** \_\_\_\_\_

**City, State and Zip Code:** \_\_\_\_\_

**Telephone:** (Home) \_\_\_\_\_ (Cell/Work) \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Preferred Site:**

Gaithersburg     Rockville     Takoma Park

**Preferred Position: (Check all areas of interest.)**

<input type="checkbox"/> Appointment Scheduler	<input type="checkbox"/> Greeter	<input type="checkbox"/> Intake Screener
<input type="checkbox"/> Preparer	<input type="checkbox"/> Promoter	<input type="checkbox"/> Quality Reviewer
<input type="checkbox"/> Site Coordinator	<input type="checkbox"/> Resource Navigator	
<input type="checkbox"/> Interpreter (List Languages): _____		

**Training Preference: (Check one.)**

Online (visit <https://www.irs.gov/individuals/link-learn-taxes>)

In-person (meet with IRS certified instructors, online certification)

**PLEASE MAIL, EMAIL, OR FAX THIS FORM TO CAA.**

**Mail: Community Action Agency**  
1401 Rockville Pike, Suite 320  
Rockville, MD 20852  
**Email: [VITA@montgomerycountymd.gov](mailto:VITA@montgomerycountymd.gov)**  
**Fax: 240-777-3295**  
**Phone: 240-777-1123**