

PROJECT APPLICATION - 2023

22

ALL APPLICATIONS MUST BE RECEIVED BY

April 14

BY FAX or EMAIL

FAX 903-581-6462 • lgardner@uwtyler.org

TELEPHONE 581-6376 x316

Agency Name		
Day of Caring Coordinator, Cell Phone # and T-Shirt Size (S-3XL)		
Street Address (This address will be used to direct your volunteers)		City & Zip
Mailing Address		City & Zip
Telephone	Fax	Email

DAY OF CARING PROJECT (One project per application)

Provide a job description for your project. Also, describe how you will utilize **DAY OF CARING** volunteers for this beautification event. **Please include plans in case of inclement weather.**

General maintenance around the campus like carpet cleaning, window washing, planting flowers, cleaning around baseboards, etc.

PROJECT SITE Where will the **DAY OF CARING** project be located?

- Agency (See street address above)
- Alternate location(s): _____

VOLUNTEER REQUIREMENTS

- Number of volunteers needed for this project: _____
- Special skills this project may require (i.e. carpentry, plumbing, etc.) _____
- Special tools required: (to be supplied by agency) _____
- Appropriate dress based on the project (i.e. jeans, shorts or etc.) _____
- Will the volunteers work with clients? YES NO
- If yes, who are the clients? (General description, not actual names) _____