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EXPRESSION OF INTEREST

Volunteer Manager - Training & Mentoring Programme

Organisation details:

Name:

Description of service:

Address:

Email:.....

Website (if any):.....

Training participant details:

Title:First Name:Last name:.....

Position title:Phone number:

How many volunteers are you managing at the moment?

How many hours/week do you normally spend on managing your volunteers?

Are you a volunteer or a paid staff? Please tick: Volunteer Paid staff

Have you had any trainings in volunteer management before? Please tick: Yes No

Are you available to complete the three day training? Please tick: Yes No

Please write in 1-2 sentences about how this programme will help you and your organisation?

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Thank you for taking your time to complete this form.

We will contact you about this as soon as possible. In the meantime, if you have any questions, please contact Phuong at events@volunteerwest.org.au or 0421 755 241.