PMI Great Lakes Chapter
Volunteer Information

VOLUNTEER INFORMATION: *(Fields in **bold** are required)*

[1] Volunteer Name:	**[2] Daytime phone**:
[3] Date submitted:	**[4] Evening phone:**
[5] Employer**:**	**[6] Email address:**
[7] Date/duration available:	**[8] Available hours per week**:
[9] PMP certified: ☐Yes ☐ No	[10] Willing to teach PMP prep class**:** ☐Yes ☐ No [11] If yes, specify PMBoK area(s):

[12] **Interested in a *specific* committee or role:** ☐Yes ☐ No, I'm willing to support any committee
[13] If yes, please specify :   Desired Committee(s) (programs, education, community outreach, etc.):   Desired role: Other activities (corporate outreach, golf, etc.):
[14] **Willing to be committee chair:** ☐Yes ☐ No
[15] **Please indicate your knowledge / proficiency level:**   **Skills** (PM, communications, html, publishing, PM tools, instruction, etc.):   **Industry Knowledge** (IT, Manufacturing, Automotive, etc.):   **PM Experience** (Project leader, PMO, scheduler, etc.):   **Other Certifications**:   **PMBoK Area Knowledge** (Risk, Cost, etc.):   **Other**:

ACTUAL VOLUNTEER ACTIVITIES: *(for PMI GLC Board of Directors Use Only)*
For multiple volunteer activities, attach additional sheets as necessary

[21] Contacted by :	**[22] Date contacted:**
[23] Still Available: ☐ Yes ☐ No	
[24] Assigned to ___ Committee	**[25] Role: ___** **Chairperson :** ☐ Yes ☐ No
[26] Actual start of volunteer involvement:	**[27] Actual end date of volunteer involvement:**
[28] Qualify for PDU's: ☐ Yes ☐ No **Number of PDU's: ___**	[29] Comments**:**