



VOLUNTEER TESTER
APPLICATION

Date _____

PLEASE PRINT CLEARLY

Name _____ Female _____ Male _____

Street _____ D.O.B. _____
mm dd yyyy

City, State, Zip _____ Phone: _____

E-mail Address _____ (work): _____

The following is needed for statistical purposes only:

ETHNICGROUP

White _____
Black _____
Hispanic _____
Asian _____
Amer. Indian _____
Other _____

EDUCATION

H.S. Diploma _____
12-14 yrs. _____
16 yrs. _____
16+ yrs. _____

HOWDIDYOUHEARABOUTUS?

Television _____
Radio _____
Family/Friend _____
Employer _____
Newspaper _____
Library _____
Literacy Org. _____
Agency _____
Poster/Flyer _____
Special Event _____
PR Talk _____

EMPLOYMENT

Full-time _____
Part-time _____
Unemployed _____
Disabled _____
Retired _____
Not in Market _____
Other (Explain):

OCCUPATION

Professional _____
Managerial _____
Clerical _____
Technical _____
Service _____
Agriculture _____
Homemaker _____
Sales _____

Specify Source:

(Optional)

Employer Name _____

Job Title _____