



FOR OFFICE USE ONLY

Vol. App. Date: ___/___/___ Staff Initials: _____

Volunteer Application Form (Please return ASAP)

The IPRHFF will feature films on the subject of Puerto Rico, its people, including those in the Diaspora, or that have a Puerto Rican in a any production role. Screenings will take place at various locations in NYC. Please review the schedule and location details at IPRHFF.COM.

Once completed, please return the application ASAP.

GENERAL REQUIREMENTS:

1. Mature & responsible
2. Sincere desire to work hard on this exciting project
3. Genuine passion for the film industry and/or theatre industry
4. General knowledge of administrative work

VOLUNTEER INFORMATION:

Name: _____ School: _____

Address: _____ Major: _____

City: _____ State: _____ ZIP: _____

Mobile Phone: _____ Home/Work Phone: _____

Web: _____ E-mail: _____

Facebook: _____ Twitter: _____ YouTube: _____

Why do you want to volunteer @ IPRHFF: _____

Have you worked with other film festivals or movie sets previously (if yes, please list the most recent): _____

FILM TRIVIA:

Favorite Film: _____ Favorite Director: _____

Favorite Producer: _____ Favorite Genre: _____

Favorite Actor: _____ Favorite Actress: _____

Honorable Mentions: _____

VOLUNTEER BACKGROUND:

Brief Summary of Employment History (Please begin with Current or Most Recent):

- 1. _____
- 2. _____
- 3. _____

Skills (i.e. Administrative, Technical, Language, etc.):

- 1. _____
- 2. _____
- 3. _____

VOLUNTEER TERMS AND CONDITIONS:

I acknowledge I am applying for a volunteer position with the current cycle of the International Puerto Rican Heritage Film Festival (hereafter IPRHFF).

I acknowledge that it is my responsibility to ask questions about anything that I do not understand regarding my role as a volunteer. If I have not asked any questions, it is because I understand my role.

I understand that as an volunteer at-will, I am free to resign at any time, just as IPRHFF is free to terminate me any time. I understand that it is my responsibility to abide by all of IPRHFF's policies. I further understand that the procedures, working conditions, and policies of IPRHFF are subject to change at any time.

I agree that I will hold in strict confidence, and not use, divulge, disclose, or communicate to any person or entity any information relating to the dealings of IPRHFF's customers, filmmakers, sponsors or other partners with IPRHFF or it's staff, consultants or volunteers as long as such information is not generally known to others outside IPRHFF. I will maintain this confidentiality for the term of my service and for a period of one (1) year following separation from IPRHFF. I understand that this confidentiality pledge will remain in effect after separation and that I will deliver to IPRHFF any originals and all copies of confidential information described above immediately upon termination, and that I will not take any confidential information without the written consent of the IPRHFF.

To agree to the Employee/Volunteer Pledge Please sign below :

SIGNATURE DATE

IPRHFF STAFF SIGNATURE DATE

PRINTED LEGAL NAME DATE

PRINTED LEGAL NAME DATE

How did you hear about IPRHFF? _____

