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**Volunteer Application Form**

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**What school do you attend? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**What is your availability with regard to volunteer time? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**What is your clinic location preference (see below)? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Do you have any prior PT volunteer or work experience (if so, when/where)?**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Clinic locations:**

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| 11320 Industriplex Blvd.Baton Rouge, LA 70809Fax (225) 295-8236industriplex@peakphysicaltherapy.comPT  | 145 Aspen Square, #ADenham Springs, LA 70726 Fax (225) 667-9554 denham@peakphysicaltherapy.com PT and OT (hand therapy) |
| 7069 Perkins Rd.Baton Rouge, LA 70808Fax (225) 769-7661perkins@peakphysicaltherapy.comPT  | 36491 Dutchtown Gardens Ave.Geismar, LA 70734Fax (225) 744-7330dutchtown@peakphysicaltherapy.comPT |
| 3103 Monterrey Blvd., #ABaton Rouge, LA 70814 Fax (225) 924-4717 monterrey@peakphysicaltherapy.com PT  | 4463 Hwy. 1 South, Ste. BPort Allen, LA 70767 Fax (225) 749-9096 brusly@peakphysicaltherapy.com PT and OT (hand therapy) |
| 750 Jefferson Hwy.Baton Rouge, LA 70806Fax (225) 831-1299midcity@peakphysicaltherapy.comPT  | 10202 Jefferson Hwy., B1Baton Rouge, LA 70809Fax (225) 292-2547pelvic@peakphysicaltherapy.com\*Pelvic Floor Specialty Clinic Only |
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**After completing this form, please bring it by, fax it, or scan and email to the Peak location you are interested in. Someone will contact you about your request. Thanks!**