

Emma Goldman Clinic
227 N. Dubuque Street
Iowa City, Iowa 52245
319-337-2112

CLINIC ESCORT VOLUNTEER APPLICATION

Date: _____

Name _____

Telephone(day) _____ Telephone (evening) _____

Address _____

Email _____

Have you previously volunteered or worked at the clinic? Yes _____ No _____

Link to your Facebook and/or Social Media Account (for security purposes) _____

How did you hear about us?

BACKGROUND

Have you ever been asked to leave or been terminated from a volunteer or employment position due to misconduct, safety concerns, or violations of policy? Yes _____ No _____

Have you ever worked or volunteered with a Pro-Choice organization? Abortion care or access?

Yes _____ No _____

If yes, please provide the information below: name of clinic or organization, area of work, or volunteer position

Name of clinic/organization _____ Phone: _____

Name of clinic/organization _____ Phone: _____

Additional information or details regarding the type of work or volunteer duties

STATE BRIEFLY

What are you most interested in gaining from a volunteer experience at the clinic?

The Emma Goldman Clinic offers a variety of health services and educational programs. We provide first-trimester abortions. Please share your perspectives on a woman's right to a legal abortion.

References

Name: _____ Phone: _____

Relationship to you: _____

Name: _____ Phone: _____

Relationship to you: _____

Emergency contact: _____ Phone: _____

Relationship: _____

Thank you! We appreciate your willingness to share your time with the Clinic.

Send completed application: dana-david@emmagoldman.com

Please submit with a copy of your photo ID

For office use only:

Application recv'd _____	Intl _____
Phone contact _____	Intl _____
Training Date _____	Intl _____
Start Date _____	Intl _____

7/15/2025