Volunteer Fixer Skill Specialty Questionnaire

Name: _____

Education (check highest level)	
Elementary	Community College/Junior College
Middle School/Junior High School	College
High School	Graduate School
Technical School	Other (please list):

What are your repair specialties? (check all that apply)			
Bicycles (tires, chains, brakes)	Electronics (including computers)		
Small appliances	Jewelry		
Vacuum cleaners	Textile/fabric		
Lamps and outlet cords	Other (please list):		

Please list below any training/experience related to your subject specialties:

Availability – (check all that apply)							
Mon	Tues	Wed	Thu	Fri	Weekend		
🗆 9 am – 1 pm	🗆 9 am – 1 pm	🗆 9 am – 1 pm	🗆 9 am – 1 pm	🗆 9 am – 1 pm	🗆 10 am – 2 pm		
🗆 1 – 5 pm	🗆 1 – 5 pm	🗆 1 – 5 pm	🗆 1 – 5 pm	🗆 1 – 5 pm	🗆 1 – 5 pm		
🗆 5 – 9 pm	🗆 5 – 9 pm	🗆 5 – 9 pm	□ 5 – 9 pm	🗆 5 – 9 pm	🗆 5 – 9 pm		