

Volunteer Application

Contact Information

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Cell Phone	
E-Mail Address	

Availability

During which hours are you available for volunteer assignments?

- Weekday mornings Weekend mornings
 Weekday afternoons Weekend afternoons
 Weekday evenings Weekend evenings

Interests

Volunteer Position Sought

- Administration
 Events
 Physical labor (carpentry, landscaping)
 Fundraising
 Children's Programs (specify which) _____
 Phone bank
 Bulletin production
 Senior Adult Programs
 Volunteer coordination
 Other

Special Skills or Qualifications

Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports.

Previous Volunteer Experience

Summarize your previous volunteer experience.

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Other:

Do you speak a foreign language? Yes No

Do you have: a driver's license? Yes No CDL _____ Yes No

Car insurance? Yes No

Reliable transportation? Yes No

Person to Notify in Case of Emergency

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Work or Cell Phone	
E-Mail Address	

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

Name (printed)	
Signature	
Date	
Staff Signature	

Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

Thank you for completing this application form and for your interest in volunteering with us.