



Volunteer Application

Name _____ Phone _____

Address _____ City _____ Zip _____

Email _____ Languages _____
(*Speak, Read, Write*)

Education & Training _____

Previous work or profession _____

Previous volunteer experience _____

Special skills, interests, hobbies _____

Volunteer Preferences:

Position information available in Adult Volunteer Opportunities Brochure

<input type="checkbox"/> Front Desk	<input type="checkbox"/> Ambassador	<input type="checkbox"/> Senior Lunch Program
<input type="checkbox"/> Gift Shop	<input type="checkbox"/> Special Events	<input type="checkbox"/> Monday Dance
<input type="checkbox"/> Tax Assistance	<input type="checkbox"/> Telephone Reassurance	

Availability (Circle Days & Time)

Monday AM PM Wednesday AM PM Friday AM PM

Tuesday AM PM Thursday AM PM

Emergency contact _____ Relationship _____

Address _____ Phone _____
(*Must be different from own number listed*)

I affirm all information listed is true and understand that volunteers are accepted on an as-needed basis.

Signature _____

Date _____

For staff use only:

Date received: _____ Received by: _____

Notes: _____

Date interviewed: _____ Interviewed by: _____

Notes/Assignment: _____