



VOLUNTEER APPLICATION

Date _____
Name _____
Address _____
City _____ State _____ Zip _____
Home Phone () _____ Work Phone () _____
E-Mail _____ Birthday _____
Employer _____
Occupation _____
School (if student) _____
Can you receive calls at work: ___ Yes ___ No ___ Emergency only

Person to be notified in an emergency:

Name _____
Phone () _____
Address _____ City _____
State _____ Zip _____

Do you speak any other language(s)? If so, please elaborate:

Previous/Current Volunteer Experience:

Do you have access to transportation? ___ Yes ___ No

How did you hear about our volunteer program?

Why do you want to be a volunteer?

What qualities (*skills, talents, knowledge, and experiences*) **do you feel you can incorporate into your volunteer work?**

What days and times are you available?

Group program opportunities:

Please check all that interest you:

- Arts and crafts
- Cooking and baking
- Exercise classes
- Holiday events
- Parties and celebrations
- Religious programs
- Cards and games
- Bingo
- Gardening Club
- Musical performances
- Trivia/current events groups
- Other _____
- Other _____

Individual program opportunities:

Please check all that interest you:

- One to one visits
- Walking club
- Letter writing
- Reminiscing
- Reading aloud
- Crossword puzzles
- Sports talk
- Other _____
- Other _____

Applicant's Signature _____

*We require a criminal background check for all volunteer applicants. We will provide the paperwork at orientation.