



Volunteer Application

<input type="checkbox"/> Adult <input type="checkbox"/> Student <input type="checkbox"/> Intern <input type="checkbox"/> Community Service <input type="checkbox"/> Other
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First Name _____ **Last Name** _____

Address _____ **City** _____ **State** _____ **Zip** _____

Driver's License: _____ **Birthday:** (Month) _____ (Day) _____

Daytime Phone: _____ **Cell Phone:** _____

Evening Phone: _____ **E-Mail:** _____

School: (if applicable) _____

Is it O.K. to identify Families Forward when calling or leaving a message at home or at work? Yes No

Would you like to receive a newsletter? Yes No

Emergency Contact: _____ **Phone:** _____

Any Health Alerts in case of emergency: _____

How did you hear about Families Forward? Ad Friend Organization
 Church Other (_____)

Besides English, I can: Speak _____ Read Write Understand but do not speak
 Speak _____ Read Write Understand but do not speak

Skills I can offer to help with:

- Organization Customer Service Research Giving Directions Accounting
- Photography Artist Bartending Catering Nutritionist
- Editing Masseur Actor Doctor/Optometrlist/Dentist Teacher
- LVN/RN/Med MFT/Therapist/Psychologist Social Worker
- Computer Graphics Decorating for Events Website Design
- I have experience as a facilitator. American Sign Language
- I have experience as a presenter. I have experience in Human Services.
- Spoken Spanish Translation Written Spanish Translation.
- Computer Skills: (Circle all that apply) Windows Microsoft Excel Access Microsoft Word Outlook Power Point
- Other: (_____)

Volunteer Opportunities: (Please check all areas of interest)

- Work in Food Pantry Childcare/Tutoring (Tues. Evenings) Front Office Assistant
- Food Drives Special Events
- Furniture Pickup (Do you have access to a vehicle? Yes No A Pickup? Yes No)

Days/Times Available: (It is our policy to require a minimum of 2 hours per week for three months)

Mon ____--____ Tues ____--____ Wed ____--____ Thurs ____--____ Fri ____--____

Starting Date: _____ **Total Hours Per Week** _____

Comments: _____

Applicant's Signature: _____ **Date:** _____

(Start Date _____ End Date _____)