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**Volunteer Application**

Our organization encourages the participation of volunteers who support our mission. If you agree with our mission and are willing to be interviewed and trained in our procedures, we encourage you to complete this application.

The information on this form will be kept confidential and will help us find the most satisfying and appropriate volunteer opportunity for you.

**Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Address:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Phone (Home)**:

**Phone (Other – please specify, work, cell):**

**Email:**

**Any special talents or skills you have that you feel would benefit our organization?** Skills and qualifications can be acquired through employment, previous volunteer work, or other activities such as hobbies or sports. What skills or qualifications do you have as a volunteer?

**Do you own a computer**? \_\_\_\_\_Yes \_\_\_\_\_ No. **Operating System**: \_\_\_\_\_Mac\_\_\_\_\_PC

**Do you own a printer ? \_\_\_\_\_\_\_\_\_Yes \_\_\_\_\_\_ No. Color Printer? \_\_\_\_\_\_\_\_Yes \_\_\_\_\_\_\_\_No**

**Do you drive and have transportation**? \_\_\_\_\_Yes \_\_\_\_\_ No

**Do you have any physical limitations?** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Interests**: Please tell us in which areas you are interested in volunteering:

\_\_\_\_\_Administration

\_\_\_\_\_Events/Programs

\_\_\_\_\_Fundraising

\_\_\_\_\_Deliveries

\_\_\_\_\_Public Relations

**In case of emergency contact** (name and contact info):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_