VOLUNTEER WITH US. INTEREST & AVAILABILITY FORM

VOLUNTEER DETAILS

NAME (FIRST & LAST):	
EMAIL:	ZIP CODE:
PHONE:	DOB:

AVAILABILITY

Specify your weekly ability. If you need to, write specific times you are available in the appropriate column and row.

	Morning	Afternoon	Evening
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			

How many hours would you like to work per week? Per month?

Are you required to volunteer for school or court? If yes, how many?

Yes

No

HOURS

Do you need transportation to get to and from the volunteering location?

Yes

No

INTERESTS

We want to learn more about you so we can help you find an opportunity you'll love.

What types of activities are you interested in?							
	Animal Care		Clerical		Education		Gardening
	Food-Prep		Health/Wellness		Marketing		Medical
	Mentoring		Legal		Other:		

Please list any relevant skills you have that you can contribute to our organization.

Do you have any relevant certifications or qualifications that you would like us to consider? Please specify.

What causes are you passionate about?							
	Children		Education		Employment		Environment
	Equality		Health/Wellness		Housing		Income
	Senior Citizens		Veterans		Other:		

Please list any specific programs or opportunities that you are especially interested in.

Do you have any ideas for opportunities, initiatives, or causes you wish to bring to this organization? Please explain.