Volunteer Application



Contact Information	
Name	
Street Address	
City State	
Phone	
E-Mail Address	
Availability	
During which days are you ava	ailable for volunteer assignments?
Monday	Thursday
Tuesday	Friday
Wednesday	Morning Afternoon
Interests	
Tell us in which areas you are	interested in volunteering
Sorting Clothes	
Organizing	
Cleaning	
Maintenance/Projects	
Deliveries	
Phone/Office Work	
Special Skills or Qualifica	tions
Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, education, including hobbies or sports.	
Agreement and Signature	
if I am accepted as a voluntee	I affirm that the facts set forth in it are true and complete. I understand that r, any false statements, omissions, or other misrepresentations made by sult in my immediate dismissal.
Name (printed)	
Signature	
Date	

Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability. Thank you for completing this application form and for your interest in volunteering with us.