



VOLUNTEER ENROLLMENT FORM

NAME: _____ DATE: _____

ADDRESS: _____

PHONE: _____ EMAIL: _____

ARE YOU 18 YEARS OR OVER: _____

SKILLS AND INTERESTS: Please list any skills, hobbies or interests you would be willing to share:

VOLUNTEER PREFERENCES: Is there a particular type of volunteer work in which you are interested?
Circle all that apply:

- | | | |
|------------------------------------|---------------------------|----------------------------------|
| Working with staff as an assistant | General office assistance | Fundraising/marketing/promotions |
| Meal service/ Kitchen assistant | Donation Drive | Janitorial/Cleaning assistance |
| Special service/Skill (list above) | Other (list below) | No Preference |

AVAILABILITY: At what times are you interested in volunteering?

- | | | |
|----------|----------|----------|
| Flexible | Weekdays | Weekends |
| Morning | Day | Evenings |

What type of commitment are you able to make at this time?

- | | | |
|------------------|-------------------|------------------------|
| On-going, weekly | On-going, monthly | One time/Special Event |
|------------------|-------------------|------------------------|

Other – Explain:

Do you have a geographic or site preference? Please list:

Do you have any physical limitations or other special needs that might limit your ability to perform certain types of volunteer work? Explain:

Volunteers may be required to complete a background screen and provide proof of Tuberculosis Clearance before providing volunteer services at HomeFirst. Do you anticipate any problem meeting these requirements?