



Today's Date: \_\_\_\_\_

## Volunteer Application

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Work Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Street Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

### Emergency Contact Information

Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

### Volunteer Interests

I am applying for the specific volunteer position of: \_\_\_\_\_

I am interested in volunteering in the following areas...

- Board membership
- Committee service (Outreach and Education, Finance, Development)
- Event committee (fall 5K Run, spring Trivia Night, early summer Annual Dinner)
- Policy advocacy
- GardenShare Ambassador – public speaking to spread the word about our work
- Bulk mailings
- Grant writing
- Data entry work
- Tech support – computer help
- Website upkeep
- Social media copywriting
- Photography
- SNAP, credit, and debit at farmers markets
- Playing music at farmers markets
- Free summer lunch for kids
- Other: \_\_\_\_\_

If interested in helping at farmers markets, which ones:  
Canton  
Potsdam  
Massena  
Gouverneur

- I'm willing to do just about anything. Just ask!

Relevant skills and hobbies: \_\_\_\_\_



### Qualifications

Highest educational degree: \_\_\_\_\_

Past volunteer experience (include organization name and dates of service):

- 1) \_\_\_\_\_
- 2) \_\_\_\_\_
- 3) \_\_\_\_\_

Why do you want to volunteer? \_\_\_\_\_

Do you have any physical limitations or are you under any course of treatment that might limit your ability to perform certain types of work?

- No
- Yes

### Availability

- Prefer weekends
- Prefer weekdays
- Prefer days
- Prefer evenings
- I'm flexible
- Other: \_\_\_\_\_
- Prefer to volunteer in or near...

Do you have a driver's license?

No

Yes

Do you have access to a vehicle you can use for volunteer work, and transport others in?

No

Yes

### References

Please list two non-family references who know you well and can attest to your character, skills, and dependability.

- 1) \_\_\_\_\_ Phone: \_\_\_\_\_
- 2) \_\_\_\_\_ Phone: \_\_\_\_\_

I understand this is an application for and not a commitment or promise of volunteer opportunity.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### If under the age of 18:

Parent/Guardian Name \_\_\_\_\_ Phone: \_\_\_\_\_

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

Signature: \_\_\_\_\_ Date: \_\_\_\_\_