

\* REQUIRED FIELDS

TELL US ABOUT YOURSELF First Name\* Middle Initial\* Last Name/Maiden Name/AKA/none\* Name preferred to be used Birthday City/State/Zip\* Address\* E-mail: CELL Phone\*: HOME Phone\*: Church/Organization: City: 1) How did you learn about our volunteer program? 2) Why are you interested in volunteering here? 3) Have you been convicted of a felony in the last 10 years\*? a.) If yes, please state date, offense & city/state of offense: (this will not necessarily keep you from volunteering)

**\*\*NOTE: BACKGROUND CHECKS ARE REQUIRED FOR ALL VOLUNTEERS** 

FORMER ADDRESS							
Please list former addresses or places of residence in the last 10 years:							
EMPLOYMENT INFORMATION							
Current/most recent employer & address:							
Position:	Date employed:		RETIRED				
STUDENT'S INFORMATION							
Current School:							
Student of:		Curre	nt or Graduation Year:				
VOLUNTEER EXPERIENCE							
Agency	Activity		Dates				

To the best of my knowledge, the above information is true and is submitted voluntarily. This information may be used and disclosed for Shepherd's House purposes. I realize as a volunteer I am not paid for my service, and am not covered under worker's compensation. I agree to comply with all guide-lines, rules and procedures.

SIGNATURE OF APPLICANT

DATE

# PLEASE COMPLETE PAGE 2 TO PROVIDE DETAILS ABOUT YOUR VOLUNTEERING INTERESTS. THANK YOU!

-Complete sections below based on your interest. Choose at least one-							
COURT-ORDERED COMMUNITY SERVICE (maintenance & adult shelter service only)							
•	Court, Probation Officer & Phone Number	r:					
•	Offense(s) causing community service: # of hours nee		eded & by when:				
	MEAL PROVIDER						
•	Meal @ 7:00 AM Br	reakfast		M T W TR F SA SU			
•	Meal @ 5:00 PM Di	inner (not daily)		M T W TR F SA SU			
ADULT SHELTER VOLUNTEER serving single men & women							
•	What days/shifts are you available to volu	Inteer? 1:00-5:00 AM / 5:00	0-8:00 AM	M T W TR F SA SU			
•		5:00-9:00 PM / 9:00	) PM-1:00 AM				
•	Are you able to volunteer at the last minu	te should someone not show	for their shift?	YES / NO			
FAMILY SHELTER VOLUNTEER serving families with children							
•	What days/shifts are you available to volu	Inteer? 1:00-5:00 AM / 5:00	0-8:00 AM	M T W TR F SA SU			
•		5:00-9:00 PM / 9:00	0 PM-1:00 AM				
•	Are you able to volunteer at the last minu	te should someone not show	for their shift?	YES / NO			
FAITH & SERVICE VOLUNTEERS   **PASTORAL LETTER OF REFERENCE FOR NON-PASTORS IS REQUIRED**							
Cir	cle area(s) of service: Bible Study	Worship/Music Prayer	Other:				
	GENERAL VOLUNTEER/OTHER (please specify)						

# PLEASE CHECK WHICH AREAS YOU ARE WILLING & ABLE TO VOLUNTEER YOUR SERVICE. *THANK YOU!*

#### ADMINISTRATION (daytime)

- Answering telephone
- □ Inventory donated items
- Mailings
- □ Word processing/Data entry
- □ Administrative assistant
- Other

#### FAITH-BASED PROGRAMS

- Bible study leaderMusic
- Other \_\_\_\_\_

### ANIMAL/PET CARE

- □ Kennels (outside)
- Other \_\_\_\_\_

# TECHNOLOGY

- □ Computer repair/maintenance
- □ Web site maintenance/design
- Graphics/design
- Other \_\_\_\_\_

## FINANCES/COMMUNICATION

- □ Make phone calls for annual auction
- Donor management
- □ Fundraising
- □ Liaison between The Haven & others
- Grant support
- Other \_\_\_\_\_

#### IN-KIND DONOR

- Inventory our Wish List items (daytime)
- Provide critical needs on occasion (milk, soap, PBJ, etc.)

## HOUSEKEEPING

- Laundry instruction (How to sort; wash)
- Other \_\_\_\_\_

#### KITCHEN/FOOD

Provide bagged lunch
Meal donor
Kitchen assistance
Other \_\_\_\_\_\_

#### FACILITY

- Electrical
- □ Gutters/downspouts
- □ Roof
- □ Heating/cooling
- Plumbing
- □ Windows
- Exterior siding
- □ Carpeting/flooring
- Painting
- □ Lawn care cutting/weeding/waste removal
- Snow removal
- Parking lot maintenance
- □ Security