Volunteer Enrollment Form

Personal Information

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Last First Middle**

**Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City\_\_\_\_\_\_\_\_\_\_, State\_\_\_\_\_\_ Zip \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Mobile: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Area of Volunteer Interest:**

**Office/Administration**

**Special Events**

**Community Projects**

**Mentoring**

**Subject Area of Interest: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(Please list any special skills, training and certifications your are willing to share )**

**Availability: Day(s) Available** M T W TH F(Please circle all that apply.)

 **Number of hours per week\_\_\_\_\_\_\_**

Mornings from (\_\_\_\_ to \_\_\_\_) Afternoon from (\_\_\_\_ to \_\_\_\_)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Days available | Monday | Tuesday | Wednesday | Thursday | Friday |
| Hours |  |  |  |  |  |
|  |  |  |  |  |  |

**Language(s) you speak other than English: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**I am available to begin volunteering for Rethink Possible Initiative projects/programs: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(Date you can begin)**

**From Month\_\_\_\_ /Year\_\_\_\_ to Month\_\_\_\_ /Year\_\_\_\_**

**Location (Company Name)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Your Position\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Supervisor/Volunteer Coordinator\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**