

VOLUNTEER APPLICATION Title: Mr. Ms. Other_____ Name: _ Middle First Last Address: City: State: Zip: Employer: ______ Position:_____ Daytime Phone: _____ Evening Phone: _____ How do you prefer to be contacted? \Box Phone \Box Email Date of Birth: Areas of Interest: (Check all that apply) ☐ Childcare ☐ Hotline ☐ Donation pick-up/delivery ☐ Special Events ☐ Other _____ ☐ Educational Outreach ☐ Furniture pick-up/delivery Please list any skills or training you have had that could benefit the agency (i.e. sign language, foreign language, computer software, etc.) What time of day are you available: \Box Day \Box Evening \Box Weekends How did you hear about Heartly House volunteer opportunities? Please be specific. Have you volunteered for Heartly House in the past? □yes □no Approx. dates:_____

What duties did you perform?_____

Please list other organizations that you have volunteered for in the past:	
Why do you want to volunteer a experience?	t Heartly House and what do you hope to get out of this
EMERGENCY CONTACT IN	FORMATION
	ng you, whom should we contact?
Name:	Relationship:
Daytime Telephone:	Evening Telephone:
REFERENCES Heartly House may conduct refe	rence checks on volunteer applicants. Use this space for
any references we may contact	You may want to include instructors, counselors or so of civic or professional groups. Please do no include
Name:	Relationship:
Email Address:	Phone:
Name:	Relationship:
Email Address:	Phone:
Name:	Relationship:
Email Address:	Phone:

Thank you for your interest in becoming a volunteer for Heartly House. Please return your applications to Heartly House Volunteer Program, P.O. Box 857, Frederick, MD 21705-0857, or email your application to volunteer@heartlyhouse.org.