

## **Volunteer Application**

**Please print or type** and complete all sections that apply.

735 N. Wisconsin Street-Suite 100 Elkhorn, WI 53121 262-472-9632 <u>volunteerwalworth@gmail.com</u> www.volunteerwalworth.org

Name:	Birth date:			
Street address:	City, zip:			
Mailing address:	City, zip:			
Phone:				
e-mail address ( <u>please print carefully</u> ):				
Emergency contact:	Phone:			
Days/times available:				
Days (or months) unavailable:				
Do you have a car? ☐ Yes ☐ No				
I understand that if I use my personal automobile to and from by V automobile insurance equal to or greater than the minimum limits in the minimum limits				
Signature of Volunteer Applicant Date	Signature of Staff	Date		
Have you ever been convicted of a felony or are any felony charges pending against you?  Yes No If yes, please explain. Answering yes will not automatically bar persons from becoming volunteers, but will be considered with respect to volunteer responsibilities.				
I hereby authorize Volunteer Connection, Inc., and/or its agents to make an independent investigation of my background, criminal or police records, including those maintained by both public and private organizations and all public records for the purpose of confirming the information provided on this form. I release Volunteer Connection, Inc. and/or its agents and any person or entity, which provides information pursuant to this authorization, from any and all liabilities, claims or lawsuits in regards to the information obtained from any and all of the above referenced sources used. I attest that the above is my true and complete legal name and date of birth and all information is true and correct to the best of my knowledge.  Signature of Volunteer applicant  Date				

OVER



FOR OFFICE USE ONLY:	Station assigned:		Date assigned:
Welcome package sent:	Entered in computer: _	By:	1/2019

Please circle all you would enjoy volunteering and/or have experience.  Diffice Accounting/bookkeeping Disablede/dedry/veterans Answer phones Grocery shop Deliver Meals on wheels Eindeain/music Crafts Facebook, web page Plick up mediations Facebook, web page Plots entry Visit with shut-ins Filing Phone shut-ins-felcare Make phone calls Respite for caregivers Project leader/coordinator Provide transportation Day of Action Day of Acti		mfortable working with:		
Accounting/bookkeeping Accounting/bookkeeping Answer phones Computers Facebook, web page Filing Fili	Pre-school	School-age Teen-age	Adult Mentally/	physically disabled
Accounting/bookkeeping Accounting/bookkeeping Answer phones Computers Facebook, web page Filing Fili				
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Answer phones   Grocery shop   Deliver Meals on wheels   Crafts   Computers   Pick up mediations   Thrift store   Facebook, web page   Run errands   Data entry   Visit with shut-ins   Sort donations, cashier   Filing   Phone shut-ins-TeleCare   Rummage sale   Make phone calls   Respite for caregivers   Project leader/coordinator   Toys for Tots   Animal care   Swirm with disabled   Provide transportation   Day of Action   Blood drives   Teach: cooking, art, music, computer, gardening   provided   Provide transportation   Deliver member   Computer, gardening   provided   Registration   Computer, gardening   Provide   Course marshal   Grift shop cashier   Museum   Clerifical   Cheer participants   Budget counselor   Data Entry   Photography   Yard work/rake, trim brush   Shovel snow   Drive golf cart   Distribute food   Library assistant-shelving   Clean gutters   Push wheelchair   Fired painty   Photography   Photography   Pushbing   Clean gutters   Push wheelchair   Fired ray as very provided   Provide transportation   Push wheelchair   Fired ray as very provided   Provide transportation   Push very provided   Carpentry   Photography   Photograph	Office			
Computers Facebook, web page Run errands Data entry Visit with shut-ins Filing Phone shut-ins-TeleCare Make phone calls Animal care Swim with disabled Provide transportation Blood drives Board member Computer, gardening Woodworking, etc. Wise with septial assistant Gift shop cashier Greeter Budget counselor Data Entry Stock shelves Distribute food Pickup / Deliver Friends of the Library  Physical/medical limitations: Visual hearing wheelchair walker/cane other  Is your request to volunteer due to community service requirements  Visit with shut-ins Thrift store One-time events Rummage sale Rumage sale Radenication Toys for Ous sammage suiter Rumage sale Rumage sale Rumage sale Rumage sale Rumage sale Rumage sale Rum				
Facebook, web page Data entry Filing Data entry Filing Make phone calls Make phone calls Make phone calls Make phone calls More phone More ph			Deliver Meals on wheels	
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Filing Make phone calls Respite for caregivers Animal care Respite for caregivers Project leader/coordinator Toys for Tots Animal care Swim with disabled Provide transportation Day of Action Walk / Runs Board member computer, gardening provided Registration Course marshal Hand out water Greeter Tour guide Electrical Carpentry Stock shelves Distribute food Library assistant-shelving Pickup / Deliver Friends of the Library Woodworking Woodworking Walk / Runs Registration Provided Registration Course marshal Hand out water Cheer participants Stock shelves Distribute food Library assistant-shelving Pickup / Deliver Friends of the Library Woodworking Woodworking Take tickets  Who can we thank for referring you?  Are you a Veteran? Yes No Physical/medical limitations: Ovisual hearing wheelchair walker/cane other  If yes, number of hours Hours are due Hours are due If yes, please briefly explain:				One time evente
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Blood drives Board member Board				
Board member computer, gardening woodworking, etc.  Wiseling All Entry Board Friends of the Library  Who can we thank for referring you?  Are you a Veteran? Yes No  If yes, number of hours  If yes, please briefly explain:  Board member computer, gardening woodworking, etc.  Quality of Life Program  Electrical Carpentry Plumbing Plumbing Yard work/rake, trim brush Shovel snow Clean gutters Push wheelchair Push w				
Hospital assistant Gift shop cashier Greeter Budget counselor Food pantry Distribute food Picture Training  Who can we thank for referring you?  Are you a Veteran?  Physical/medical limitations: visual hearing wheelchair walker/cane other  If yes, please briefly explain:  Woodworking, etc.  Quality of Life Program Electrical Carpentry Plumbing Plumbing Plumbing Yard work/rake, trim brush Shovel snow Dive golf cart Clean gutters Woodworking Take tickets  Clan gutters Woodworking  Take tickets  Clean gutters Woodworking  Take tickets  Find a sising  Who can we thank for referring you?  Are you a Veteran? Yes \( \) No \( \)  Physical/medical limitations: \( \) visual \( \) hearing \( \) hearing \( \) wheelchair \( \) walker/cane \( \) other  If yes, number of hours \( \) Hours are due \( \)  If yes, please briefly explain:				
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Who can we thank for referring you? Are you a Veteran? Yes \_ No \_  Physical/medical limitations: \_visual \_ hearing \_wheelchair \_walker/cane \_other  Is your request to volunteer due to community service requirements Yes \_ No \_  If yes, number of hours Hours are due  If yes, please briefly explain:				
Who can we thank for referring you?Are you a Veteran? Yes \_ No \_  Physical/medical limitations: \_ visual \_ hearing \_ wheelchair \_ walker/cane \_ other  Is your request to volunteer due to community service requirements Yes \_ No \_  If yes, number of hours Hours are due  If yes, please briefly explain:		FIIelius Oi tile Library		I ake lickers
Is your request to volunteer due to community service requirements Yes No Service No Service No Service No Service Requirements Yes No Service No S	Are you a Veteran?			
If yes, number of hours Hours are due If yes, please briefly explain:	Physical/medical limita	ations: ○visual ○ hearing ○w	/heelchair ○walker/cane ○oʻ	ther
List other interest or anything you would like us to know:	If yes, number of l	hours Hours are due_		0 🗆
List other interest or anything you would like us to know:				
	List other interest or any	ything you would like us to know	<u>r.</u>	



**YOU** CAN MAKE A DIFFERENCE!