

Volunteer Application Form

Name:

Pronouns:

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Date of Birth:

Phone Number:

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Address:

Email:

What days of the week are you consistently available and what times do you prefer?

Monday	<input type="checkbox"/> 3:30pm - 6:30pm	<input type="checkbox"/> 6:30pm - 9:30pm
Tuesday	<input type="checkbox"/> 3:30pm - 6:30pm	<input type="checkbox"/> 6:30pm - 9:30pm
Wednesday	<input type="checkbox"/> 3:30pm - 6:30pm	<input type="checkbox"/> 6:30pm - 9:30pm
Thursday	<input type="checkbox"/> 3:30pm - 6:30pm	<input type="checkbox"/> 6:30pm - 9:30pm
Friday	<input type="checkbox"/> 3:30pm - 6:30pm	<input type="checkbox"/> 6:30pm - 9:30pm

Where did you hear about us?

<input type="checkbox"/> Referral	<input type="checkbox"/> Friend or Family	<input type="checkbox"/> Personal Inquiry	<input type="checkbox"/> Social Media
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What are your areas of interests? Other _____

<input type="checkbox"/> Fundraising	<input type="checkbox"/> Event Planning	<input type="checkbox"/> Media	<input type="checkbox"/> Arts & Culture
<input type="checkbox"/> Health / Wellness	<input type="checkbox"/> Grant Writing	<input type="checkbox"/> Life Skills	<input type="checkbox"/> Accounting

You must be able to provide one of the following? (dated within the last 90 days of application)

<input type="checkbox"/> Criminal Record Check (CRC)	<input type="checkbox"/> Vulnerable Sector Check (VSC)
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Please provide (2) references below. (Please print name and provide a contact number)

1.	2.
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OUTLOUD

NORTH BAY