

ResourceWest Volunteer Application

YOUR CONTACT INFORMATION

Name	<input type="text"/>	Date of Birth	<input type="text"/>
Address	<input type="text"/>		
Email	<input type="text"/>	Phone Number	<input type="text"/>

YOUR SKILLS & EXPERIENCE

Occupation/Place of Employment	<input type="text"/>
Prior Volunteer Experience	<input type="text"/>
Relevant Skills or Hobbies	<input type="text"/>

VOLUNTEER INTERESTS

Check which volunteer opportunities you are interested in. For more information about these opportunities, please see: www.resourcewest.org/volunteer/

<input type="checkbox"/> Children & Youth Programs	<input type="checkbox"/> Fundraising Event Support
<input type="checkbox"/> Front Desk Reception	<input type="checkbox"/> Data Entry
<input type="checkbox"/> Engagement	<input type="checkbox"/> Project-Based

OTHER

Why are you interested in volunteering at ResourceWest?

How did you hear about ResourceWest?

Is there anything else you'd like to share?

PLEASE FILL OUT AND RETURN TO ZACH SPIROV, ZACH@RESOURCEWEST.ORG



ResourceWest Volunteer Application

EMERGENCY CONTACT INFORMATION

Name

Relationship Phone Number

AVAILABILITY TO VOLUNTEER - CHECK ALL THAT APPLY

- | | |
|-------------------------------------|--------------------------------------------------|
| <input type="checkbox"/> Mornings | <input type="checkbox"/> Weekdays |
| <input type="checkbox"/> Afternoons | <input type="checkbox"/> Weekends |
| <input type="checkbox"/> Evenings | <input type="checkbox"/> Fluctuates - Always Ask |

EMAIL PREFERENCES

We like to keep our volunteers informed of ResourceWest news, organizational updates, and volunteer opportunities by email. Would you like to receive monthly e-newsletters, and occasional email updates?

☐ Yes, please send me emails

HAVE YOU EVER BEEN CONVICTED OF A MISDEMEANOR OR FELONY?

☐ Yes ☐ No

If yes, please explain:

STATEMENT OF UNDERSTANDING

I verify the information on this application to be complete and accurate. As a volunteer of ResourceWest, I agree to support ResourceWest's mission of supporting individuals and families in the West Metro through collaborative programs and connections to resources as they move toward greater stability.

☐ Yes, I agree

PHOTO RELEASE

I hereby agree to give ResourceWest permission to use photos and videos that include me for publication.

☐ Yes, I agree

SIGNATURE

DATE

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