** VOLUNTEER APPLICATION FORM**

5213 Shoreline Drive Mound, MN 55364 PH. 952-472-0742 FAX 952-472-5589

Date\_\_\_\_\_\_\_\_ First Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Middle\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City, State, Zip \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone (H) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(C) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Other) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** Gender \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Education level (circle one) High school Some college Associates Bachelors Masters Doctorate Trade

Are you a veteran? Yes No Is an immediate family member who is a veteran? Yes No

How did you hear about us? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Preferred method of communication (circle one) Home Cell Email Text

**Please list a personal emergency contact person:**

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_ Zip\_\_\_\_\_\_\_\_ Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Release to use photos / videos for promotional purposes:**  I understand that WeCAN may take photos/videos that may include me while I am participating in WeCAN activities. I hereby agree to allow WeCAN to use my image and name in any medium or form of distribution, and for whatever purposes, including promotional and advertising uses.

*Initial* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Volunteer Area of Interest (check all that interest you)**

□ Administrative Assistance □ Special Events/Fundraisers

□ Marketing □ Front Desk Assistance

□ Mobile Market/Food Program □ Meals on Wheels (mornings only)

□ Adopt-a-Family Holiday Gifts □ Budgeting, job skills, resume help

□ Birthday Shelf □ Ready to Learn School Supplies

**Please list your special skills, experience, interests, etc.**

This will enable us to match you to the areas you will feel most comfortable and be of most help to WeCAN.  **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
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**Availability** – Please circle the time(s) of the day(s) you are available

Monday AM PM

Tuesday AM PM EVENING

Wednesday AM PM

Thursday AM PM

Friday AM PM

My availability is (circle one) Ongoing Ongoing, except between \_\_\_\_\_\_\_\_\_ and \_\_\_\_\_\_\_\_ Only between \_\_\_\_\_\_\_\_\_ and \_\_\_\_\_\_\_\_\_\_

I’d like to serve up to \_\_\_\_\_\_\_\_\_ hours each (circle one) week month

I agree that all of the information above is accurate and that I may be required to offer additional information, provide additional paperwork, and/or submit to a background check prior to placement.

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_