



Home Chore Volunteer Application

Individual Information

Name:		M.I.	
Date of Birth:			
Street Address:		Zip:	
Home Phone:		Work/Mobile:	
E-Mail Address:			
Sex:	Female ___ Male ___	Disabled?	Yes ___ No ___
Race:	African American ___	American Indian/Alaskan Native ___	
	Asian/Pacific Islander ___	Hispanic/Latino ___	White ___
Can we call you at work? Yes ___ No ___			
What is the best time to reach you?			

Availability

During which hours are you available for volunteer assignments:

- | | |
|---|---|
| <input type="checkbox"/> Weekday mornings | <input type="checkbox"/> Weekend mornings |
| <input type="checkbox"/> Weekday afternoons | <input type="checkbox"/> Weekend afternoons |
| <input type="checkbox"/> Weekday evenings | <input type="checkbox"/> Weekend evenings |

How often would you like to help? _____

Would you prefer: Ongoing assignment One time/short-term tasks Both

Do you have transportation? Yes ___ No ___

Interests

Tell us what kind of home chores you'd like to help with:

- | | |
|---|--|
| <input type="checkbox"/> Light housework | <input type="checkbox"/> Snow shoveling |
| <input type="checkbox"/> Laundry | <input type="checkbox"/> Repair/light carpentry |
| <input type="checkbox"/> Shopping | <input type="checkbox"/> Window washing/changing |
| <input type="checkbox"/> Take out garbage/recycling | <input type="checkbox"/> other <i>please specify special skills you may have</i> |
| <input type="checkbox"/> Basement/garage/attic organizing | _____ |
| <input type="checkbox"/> Yardwork (gardening, raking, etc.) | _____ |

How did you hear of us?

(OVER)

Special Skills or Qualifications

Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports.

Previous Volunteer Experience

Summarize your previous volunteer experience.

Character References – please list individuals we may contact who have known you for at least two years, other than a relative.

Name:		Relationship:	
Phone/E-Mail:			

Name:		Relationship:	
Phone/E-Mail:			

- Have you ever been convicted of, or do you presently have pending, any violations of law?
Yes _____ No _____

Explain:

In accordance with state law and city ordinances, pending charges or convictions will not be used or considered unless they are substantially related to circumstances of the particular job.

Agreement and Signature

I authorize the staff of the Home Chore Volunteer Program to contact the above references and check with the appropriate authorities on matters of public record regarding my background, as related to this volunteer position. I understand this information will be kept confidential.

Signature _____ Date _____

Our Policy

North/Outside
SENIOR
Coalition

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability. Thank you for completing this application form and for your interest in volunteering with us.