



REACH of Haywood

Friends of REACH Volunteer Application



Name:		Date:
Address:		
City:	State:	ZIP:
Phone:	Cell:	Email:
Social Security #:	Gender: <i>(optional)</i> <input type="checkbox"/> male <input type="checkbox"/> female	
Are you 18 years or older? <input type="checkbox"/> yes <input type="checkbox"/> no	Occupation:	
Emergency contact: <i>(please provide name and any applicable phone numbers)</i>		
Are you a full-time resident? If not, what months are you available?		
Is there anything we should know about your health or physical limitations?		
Previous volunteer experience:		
Relevant interests and outside activities:		
How did you hear about REACH and its programs?		
Why do you want to be a REACH volunteer?		
Please indicate all volunteer opportunities which interest you:		
<input type="checkbox"/> Within Reach Resale Store <input type="checkbox"/> Client Services <input type="checkbox"/> Crisis Helpline <i>(training provided)</i> <input type="checkbox"/> Special Events <input type="checkbox"/> Any Immediately Needed Services		
Other languages: <input type="checkbox"/> Spanish <input type="checkbox"/> French <input type="checkbox"/> American sign language <input type="checkbox"/> Other:		
Do you have transportation? <input type="checkbox"/> yes <input type="checkbox"/> no	Days and hours available:	

Would you like to attend a 1/2 day training session on domestic violence, sexual assault, and elder abuse? Tick:

Important Notice:

Volunteer status requires a completed Volunteer Application form, a satisfactory background check, and written consent to the Volunteer Requirements and Policies, and to the Confidentiality Agreement. Helpline volunteers will also need to complete a Pre-Volunteer Confidentiality Contract prior to training, and a formal agreement to volunteer.

For office use only:

Applicant contacted by: _____ *Date:* _____

Executive Director approval: _____ *Date:* _____

Volunteer Database: _____ *Date:* _____