VOLUNTEER APPLICATION:

Please check the appropriate box (es)

I am interested in volunteering for The Center for Youth and Family Solutions [ ]

I am interested in volunteering for RSVP [ ]  (applicant must be 55 years of age or older)

**Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Last) (First) (Middle)

**Address**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Address) (City) (Zip)

**Email Address**: T**elephone**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ **DOB: \_\_\_\_\_/\_\_\_\_\_\_ /\_\_\_\_\_\_\_**

Preferred method of contact: phone [ ]  email [ ]  **check if you are a Veteran**: [ ]

Special Interests or Hobbies: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Skills/Languages: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Volunteer Experience: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employment History: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Volunteer Opportunities desired for The Center for Youth and Family Solutions:**

Friendly Visitor Senior Program[ ]

Administrative Support[ ]

Advancement (fundraising, event planning, community outreach)[ ]

Afterschool Assistant[ ]

Child Care[ ]

Mentor[ ]

Performing Arts[ ]

Residential Reading Buddy Program[ ]

Special Events (one time opportunities)[ ]

Tutor[ ]

**Availability:**

Day (s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Time (s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please list three references: professional and/or personal (excluding relatives)**

Name/Relationship Address City Zip Phone

1. **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
2. **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
3. **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

I hereby give permission to contact the references listed above:

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

**RSVP Volunteers Opportunities:**

Interest Check List (please check all areas of interest and designate your top two preferences with an \*)

Adult Education☐

Advisory Council/Board☐

Animals☐

Assist with Newsletters☐

Band & Music☐

Basic Needs☐

Bookkeeping☐

Bulk Mailing☐

Carpentry☐

Child Care☐

Clerical-Type/File☐

Community Projects☐

Computer Skills☐

Conservation/Environment☐

Cooking☐

Deliver Blood☐

Deliver Prepared Meal☐

Disability Services Assistance☐

Disaster Preparedness☐

Driving☐

Elder Care☐

Food Bank☐

Friendly Visitor☐

Fundraising☐

Games & Crafts with Children☐

Gardening☐

General Maintenance☐

Gift Shops (general) ☐

Greeter☐

Guides (Historical Tour)☐

Handcrafts☐

Handwrite Letters☐

Health care/nursing☐

Health Education☐

Health Insurance☐

Historical Education☐

Home Del. Meal☐

Hospice☐

Hospital Help Service☐

Hospitals-Gift Shop☐

Host/Hostess☐

Income Tax Assistance☐

Information Help Desk☐

Intergenerational Activities☐

Library Aide☐

Literacy /Tutoring☐

Maintenance/Grounds Assistance☐

Meal Preparation☐

Phone Answering/Receptionist☐

Photography☐

Playing Cards☐

Public Safety☐

Public Speaking☐

Quilting/Sewing☐

Read to Special Groups☐

Red Cross Canteen☐

Senior Activities☐

Senior Booth Fairs☐

Senior Companionship☐

Senior Help Services☐

Senior Nutrition☐

Senior Transportation☐

SHIP Counseling☐

Special Events☐

Sports☐

Staff Support☐

STARS onetime events☐

Swimming Instructor☐

Tax Assistance☐

Teaching☐

Thrift Shop☐

Tourism Info☐

Transport/Escort☐

Traveling☐

Woodworking/Craft☐

Word Processing☐

Work with Special Populations☐

Youth Mentoring☐

Volunteer Opportunities for RSVP: I understand that I am not an employee of the RSVP project, the sponsor, the volunteer station for the Federal Government and agree to serve without compensation. I further agree that if I use my personal automobile to drive to and from my volunteer station or during my service, I will keep in effect automobile liability insurance equal to or greater than the minimum require by the state.

**RSVP Volunteers Only:**

**Emergency Contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Beneficiary for RSVP Supplemental Accident Insurance:**

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_\_\_\_\_**

**Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_

Signature of Volunteer Date Signature of RSVP Staff Date

**Enrollment Form: Detachable Addendum**

This information will be used by the sponsor for statistical purposes only. It will only be used in the aggregate, and will not be compiled or disseminated in ways that will identify the individuals. This information will not be used in evaluating assignments or placements. Completion of this section is strictly voluntary. Failure to respond will in no way affect your consideration for available volunteer opportunities.

**What is your race and or Ethnicity**? (Select one or more)

NA-Native American/Alaskan [ ]

AO-Asian[ ]

BL/African American[ ]

PI-Native Hawaiian/Pacific Islander[ ]

WH-White/Non-Hispanic[ ]

HS-Hispanic South American[ ]

HM-Hispanic Mexican[ ]

HP-Hispanic Puerto Rican[ ]

HD-Hispanic Spanish Descent[ ]

HC-Hispanic Cuban[ ]

HN-Hispanic Dominican[ ]

Central American[ ]

HO-Hispanic Other[ ]

UK-Unknown[ ]

DI-Declined to Identify[ ]

CV-Could not be Verified[ ]