



Volunteer Application

Contact Information

Date:	
Name	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone	
E-Mail Address	

What church do you attend? _____

How did you hear about us? _____

Availability

During which hours are you available for volunteer assignments?

_____ Monday _____ Thursday
_____ Tuesday _____ Friday
_____ Wednesday _____ Saturday

Interests

Tell us in which areas you are interested in volunteering

- ___ Office
- ___ Events
- ___ Store
- ___ Fundraising/Committee
- ___ Mailings
- ___ Maintenance
- ___ Grounds keeping

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.

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Person to Notify in Case of Emergency

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone	
E-Mail Address	

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal. I agree to supply any additional information needed for the Women's Refuge to do a background check. SS # _____ - _____ - _____

Name (printed)	Date of Birth
Signature	
Date	

Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, age, or disability.

Thank you for completing this application form and for your interest in volunteering with us.

Office Use Only

Revised 01/08/26