



Volunteer Information Form

Return to P. O. Box HM 1773, Hamilton HMHX or Fax to 296-3270

Consider this your first volunteer assignment. Please fill out carefully
Call 292-4360 for assistance in filling out this form.

Name _____ Date _____

Address _____

Parish _____ Postal Code _____

Day Phone _____ Evening Phone _____ after ____;

FAX _____ Email: _____

The Coordinator of Employee and Volunteer Resources will help you choose a volunteer assignment during an interview. Please indicate your general **area(s) of interest** below:

- | | | |
|---|--|---|
| <input type="checkbox"/> <i>Resident Assistance</i> | <input type="checkbox"/> <i>Buddy</i> | <input type="checkbox"/> <i>Education/ Tutoring</i> |
| <input type="checkbox"/> <i>Professional Services</i> | <input type="checkbox"/> <i>Office Support</i> | <input type="checkbox"/> <i>Maintenance</i> |
| <input type="checkbox"/> <i>Special Events/ Fundraising</i> | <input type="checkbox"/> <i>Not Sure</i> | <input type="checkbox"/> <i>Other</i> _____ |

How did you first hear about The Sunshine League Children's Home _____?

Occupation _____

Current Employer _____

Work and Life Experience, beginning with current situation (feel free to attach additional information)

Hobbies _____

Are you 21 years or older Yes No

(any assignment that involves having direct contact with a resident requires a volunteer who is at least 21 years old as well as a Police Clearance and Confidentiality Waiver)

Are you fluent in a language other than English? Please specify: _____

(Please Turn Over)

The Sunshine League Volunteer Information (cont'd)

Please check all the times you may be available to volunteer:

	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.	Sun.	Holidays	As Needed
Mornings									
Afternoons									
Evenings									

Additional information about your availability:

Please check all the skills you are willing to use for the Sunshine League Children's Home:

- | | | | | |
|--|---|---|---|-------------------------------------|
| <input type="checkbox"/> Academic Support | <input type="checkbox"/> Editing | <input type="checkbox"/> Public Speaking | <input type="checkbox"/> Recreation Assistance | <input type="checkbox"/> Writing |
| <input type="checkbox"/> Accounting | <input type="checkbox"/> Household Repairs | <input type="checkbox"/> Interviewing | <input type="checkbox"/> Research | <input type="checkbox"/> Other_____ |
| <input type="checkbox"/> Arts & Crafts | <input type="checkbox"/> Educational | <input type="checkbox"/> Ironing | <input type="checkbox"/> Spiritual Development | |
| <input type="checkbox"/> Auto Repair & Paint | <input type="checkbox"/> Electrical | <input type="checkbox"/> Landscaping | <input type="checkbox"/> Shopping | |
| <input type="checkbox"/> Carpentry | <input type="checkbox"/> Financial | <input type="checkbox"/> Legal | <input type="checkbox"/> Strategic Planning | |
| <input type="checkbox"/> Catering | <input type="checkbox"/> Fundraising | <input type="checkbox"/> Marketing | <input type="checkbox"/> Telephone | |
| <input type="checkbox"/> Civil Rights/Advocacy | <input type="checkbox"/> Individuals | <input type="checkbox"/> Masonry | <input type="checkbox"/> Tagging on Tag Day | |
| <input type="checkbox"/> Coaching Sports | <input type="checkbox"/> Special Events | <input type="checkbox"/> Moving | <input type="checkbox"/> Training | |
| <input type="checkbox"/> Construction | <input type="checkbox"/> Grant Writing | <input type="checkbox"/> Notary Public | <input type="checkbox"/> Transportation | |
| <input type="checkbox"/> Cooking | <input type="checkbox"/> Corporate | <input type="checkbox"/> Painting | <input type="checkbox"/> Tutoring | |
| <input type="checkbox"/> Professional Consulting | <input type="checkbox"/> Gardening | <input type="checkbox"/> Party organizing | <input type="checkbox"/> Video Production | |
| <input type="checkbox"/> Computer Skills | <input type="checkbox"/> General Office | <input type="checkbox"/> Photography | <input type="checkbox"/> Amateur | |
| <input type="checkbox"/> Data Entry | <input type="checkbox"/> Graphics | <input type="checkbox"/> Plumbing | <input type="checkbox"/> Professional | |
| <input type="checkbox"/> Desktop Publishing | <input type="checkbox"/> Group Facilitation | <input type="checkbox"/> Public Relations | <input type="checkbox"/> Word Processing/Typing | |
| <input type="checkbox"/> Domestic (Cleaning) | <input type="checkbox"/> Haircutting | <input type="checkbox"/> Public Speaking | wpm_____ | |
| | | | program_____ | |

Additional explanation of Skills_____

Check here if you have volunteered with The Sunshine League Children's Home in the past. If so, please write what you did, dates and with whom you worked_____

In case of an emergency involving you, whom should we contact?

Name_____ Relationship_____ Phone_____

Please give the names of two persons who can attest to your character

Name_____ Phone_____

Name_____ Phone_____

Thank you for choosing The Sunshine League Children's Home as a place to Volunteer!!