



Face to Face Volunteer Application

Name: _____

Complete Address: _____

Best Phone Number to Reach You: _____

Email: _____

Sex: Female Male Birth Date: ____/____/____

Student: Yes No If yes, where: _____

Will you be receiving academic credit for your volunteer work? Yes No

Are you volunteering as part of a group/organization: Yes No

Name of group/organization: _____

Current Employer: _____

Occupation: _____

How did you hear about Face to Face?

Previous affiliation Web Listing Through friend/family Staff
 School Newspaper Other: _____

Why are you interested in volunteering with Face to Face?

Previous Volunteer Experience: _____

Please indicate your areas of interest:

Administrative SafeZone Special projects Education
 Mental health Prenatal & adolescent services



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Please include any additional information regarding previous volunteer or life experiences, education, or skills that would help us match you with our volunteer opportunities:

Are you available for special events? _____

Additional considerations: _____

Are there any medical/physical concerns to be considered in your volunteer assignment? Yes No If yes, please explain: _____

When are you available to volunteer?

Day	Morning # of Hours	Afternoon # of Hours	Evening # of Hours
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday	N/A		N/A

How often do you plan to volunteer?

One time Recurring

If recurring, how long will you like to volunteer? _____

Emergency Contact:

Name: _____ Relationship to you: _____

Phone: _____ Cell/Work/Home (Please circle one)



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References (Personal or Professional):

1. Name: _____ Phone: _____

Address: _____

Email: _____

2. Name: _____ Phone: _____

Address: _____

Email (optional): _____

Would you like to be added to our Face to Face Monthly Newsletter? Yes No

I certify that the information I have provided on this application is accurate and up to date. I understand that acceptance of this application does not constitute acceptance as a volunteer, and that assignment to a volunteer position is based on assessment by program staff and the availability of a suitable position for me. I further understand that submitting this application does not obligate me to act as a volunteer with Face to Face.

Signature: _____ Date: _____

I grant permission for Face to Face to use any/all photos taken of me for use in Face to Face publications without compensation.

Signature: _____ Date: _____