



Volunteer Application

Name _____ Phone _____

Mailing Address _____

Email _____

What is the best way to contact you? _____

What is the best time to reach you? _____

In which area(s) would you like to volunteer? Please check any of interest.

- Clothing Boutique
- Learning Center
- Coffee Bar
- Bike Shop
- Furniture Shop
- Other _____
- Counseling/Mentoring
- Janitorial
- Facility/Property Maintenance
- Publicity
- Fundraising

Do you have any previous experience with this type of work? If so, please explain briefly.

Which days and times are you generally available to help?

M _____ T _____ W _____ Th _____ F _____ Sa _____ Su _____

I would like to help _____ days per week OR _____ days per month.

I would like to help _____ hours a week OR _____ hours a month.

Do you attend a local church? If so, which one? _____

I understand that a background check will be done before I am approved as a Bridge volunteer.

Signature

Date

For Office Use Only

Date Received _____ Initial Contact _____ Background Check _____ Date Approved _____

Follow Up Contact _____ Name Tag Request _____ Application Copy to Team Leaders _____