



Educating Young Minds Since 1967

Volunteer Information Profile Sheet

Date: _____

Full Name: _____ **Date of Birth:** _____

Address: _____

Cell Phone #: _____ **Home Phone #:** _____

Email: _____

Please provide a brief response to the following questions:

Please describe any past volunteer work experience you have been involved in that might relate to your interest in volunteering with us. _____

What training or formal education have you received that might help us while you are volunteering? _____

Do you have any physical limitations on the type of work that you are able to do?

Availability

How many hours a week do you wish to volunteer?

Are you just looking to volunteer on an 'event by event' basis? Yes____ No____

I would like to be informed of events as well as other volunteer opportunities Yes____ No____

Days and Times Available:

Skills & Interests:

Drawing/Painting _____ Gardening _____
Photography _____ Cleaning _____
Party planning _____ Baking/Cooking _____
Playing an instrument _____ Receptionist/Office work _____
Facilities Maintenance _____ Newsletter or article writing _____
Acting/Performing Arts _____ Reading with children _____

Do you have a food handler’s permit? Yes No

Please list below any other skills or interests you are proud of and are willing to share with us!

FOR OFFICE USE ONLY

Date of Interview: _____

Interviewer: _____

Notes: _____

Action: _____