

# VOLUNTEER APPLICATION

## Contact Information

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

## Availability

Please highlight your availability to volunteer during the week:

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Mornings	Mornings	Mornings	Mornings	Mornings	Mornings	Mornings
Afternoons	Afternoons	Afternoons	Afternoons	Afternoons	Afternoons	Afternoons

## Interests

Tell us in which areas you are interested in volunteering. Check all that apply:

- Garden Volunteer**-hands on work in the garden or around the farm; weeding, planting, harvesting
- Buddy Program Volunteer**-accompany an individual with disabilities on garden/farm projects
- Special Project Volunteer**-skillset may include hand tool usage, general carpentry, heavy lifting, etc.
- Fiber Arts Volunteer**-work together with Core Members and others on felting, carding, weaving, etc.
- Residential Volunteer**-assist in helping RA's with daily tasks and home-life needs for Core Members
- Family Friends**-established relationship with Core Members, may offer program or activity for CM's.
- Unsure/Other** \_\_\_\_\_

\*\*\*We encourage a visit to the farm first to help match your skillset to our needs. Tours are available on the first Wednesday of the month from 12-1pm, and the first Friday from 3-4pm.

## Special Skills

Summarize special skills you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports.

## Previous Volunteer Experience

Summarize your previous volunteer experience.

### How did you find out about Peacehaven?

<input type="checkbox"/> Website
<input type="checkbox"/> Social media
<input type="checkbox"/> College class
<input type="checkbox"/> Volunteer/job fair
<input type="checkbox"/> Community event
<input type="checkbox"/> Word of mouth
<input type="checkbox"/> Other

### Specific Interests

What type of experience are you hoping to gain as a volunteer at Peacehaven?

--

### Person to Notify in Case of Emergency

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

### Disclosure and Confidentiality

All Family Friends and Respite Volunteers are asked to authorize Peacehaven to conduct a Background Check, National Sexual Offender Check and DMV Check.

### 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 Family Friend or Respite Volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my disqualification from the program.

Name (printed)	
Signature	
Date	

### Further Information

Once your application has been reviewed and accepted, you will receive additional information regarding your specific volunteer role.

### Our Policy

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

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