OFFICE USE ONLY Decision	App received// Interview// By	
Attended Training 1	2 3 4 Confidentiality / /	
Post Training Interview	/ By Assignment: Office/On-Call/	
Other	Contract/ Inactive/	
Reason		



PO Box 2963 Huntington, WV 25728 Huntington Office - 304-523-3447 Mason County Office - 304-675-6724

	Vo	olunteer Applicatio	on
Da	Date:		
Na	lame:		Date of birth://
	.ddress: ip:	City:	State:
	•	ut a ataw bu tha bact way	to woodh way
	lease fill out all that apply and polome phone:		
W	Vork phone:	Email:	
	Occupation:		
1.	. Briefly describe your employme	ent background.	
2.	. Please describe your education	al background.	
3.	. What are your reasons for want	ing to volunteer with CO	NTACT?
4.	. List any skills/interests you wo graphic design skills, fund raisi	_	ith us (i.e., computer skills,
5.	. What to you think that you can	offer CONTACT in the rol	le of volunteer advocate?

	Do you have transportation readily available to you?YesNoAdvocacy Volunteers take counseling calls at least one shift per month for one year. We schedule an on-call and a back-up volunteer for each shift. There are two types of shifts: nights or			
	weekend day. Check any shifts you prefer: overnight, 7 pm - 7 am any day			
	weekend day, 7 am-7pm Saturday or Sunday			
	I am willing to be called/receive emails about any open shifts			
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8.	Office Volunteers sign up to help out at the office (clerical work, etc) on a regular basis (e.g. one afternoon per week, or one day per month), or on an as needed basis (preparing for events, staffing information tables, publicity). Please check your preference:			
	regular schedule (your preference)			
	as needed, I am generally: weekdays, evenings, weekends			
	Notes on your availability?			
9.	<u>All volunteers</u> are required to receive 15 hours in-house initial training. Are you willing to attend initial training?YesNo			
10. Once trained all volunteers are required to complete 8 hours of continuing education during the next 12 months. Are you willing to attend quarterly volunteer in-service meetings?YesNo				
11.	. What days of the week and times of day are best for in-service meetings?			
12.	. Is there any other information you would like to share about yourself?			
13	. How did you learn about volunteer opportunities at CONTACT?			
14.	Please provide us with the names of two references:			
	Name:Phone:			
	Your relationship to this person:			
	Name:Phone:			
	Your relationship to this person:			