



Jobs of Hope Volunteer Application

Thank you for your interest in volunteering with Jobs of Hope. Please contact info@jobsofhope.org if you have any questions about this application or volunteer opportunities at Jobs of Hope.

I. Volunteer Information

First Name _____ Last Name _____

Street Address _____ Apt # _____

City _____ State _____ Zip _____

Phone _____ Email _____

Are you above 18 years of age?

Yes

No

II. Experience

Languages Spoken _____

Occupation (past, if retired) _____

Previous Volunteer Experience, If Applicable _____

Other information that will help us match you with a volunteer position

(education, hobbies, skills, etc.) _____

III. Volunteer Interest

Please indicate which volunteer positions you are interested in. Volunteer positions may require training. Please visit www.jobsofhope.org/volunteer for more information.

Employment Readiness:

- Resume Writing
- Job Applications
- Mock Interviews

Life Skills

- Budgeting
- Goal Setting
- Etc.

Client Transportation

Other _____

Administrative/Office
Work

Donation Center (Food
Pantry, Clothing Closet)

Please briefly explain your interest in volunteering with Jobs of Hope

IV. Availability

Please check all applicable options:

Morning

M

T

W

Th

F

Sat

Sun

Afternoon

M

T

W

Th

F

Sat

Sun

Evening

M

T

W

Th

F

Sat

Sun

Frequency:

Weekly

Monthly

One-Time

As Needed

Other

V. Emergency Contact

Name _____

Phone _____ Relationship _____

Please Note:

A background check will be performed on all volunteers. Those wishing to volunteer as drivers will also be asked to complete a driving check form.