

## The Friendship Center Application for Volunteer Services

Name	
Address	
Phone Number	Date of Birth
E-mail Address	
Current Employer:	Phone Number:
Please List Any Previous or Current Volunte	er Experience (Organization/Responsibility/Dates)
1	
2	
3	
4	
Please List Your Employment & Training  1	
2	
3	
Which Volunteer Roles Are You Interested In	? (Check All That Apply)
Childcare Groups	Front Desk/Office Work
Donation Organization	Special Events
Outdoor/Indoor Cleaning	Community Outreach & Distribution
Other (Please s	pecify)
I Am Interested In Volunteering For (Check All	That Apply)
1-Time events (low-commitment) Short-med	ium term projects Regularly scheduled hours

What Attracts You To Volunteering at The Frie	endship Center?
What Are Your Hobbies and Interests?	
Please List Your Skills/Qualities That You Will B	
AVAILABILITY	
Days Available For Work:	
☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thurs	day 🗌 Friday 🔲 Saturday 🔲 Sunday
Times Of Day Available For Work:	
otal Hours Available For Work: Weekly?	Monthly
MERGENCY CONTACTS	
. Name:	Phone Number
. Name:	Phone Number
<u>EFERENCES</u>	
Name:	
elephone:	
elationship:	
lationship:	

## **SIGNATURE**

	nts herin are true and accurate to the best of my knowledge
	ize The Friendship Center to check my education,
employment and community service b	ackground as necessary to complete the application process.
(Signature of Applicant)	(Date)

**THANK YOU!** We look forward to meeting you! Please send this application to: The Friendship Center Volunteer Program 1430 Sanders Helena, MT 59601

Or E-mail officem@thefriendshipcenter.org