



lifehouse

serving people with developmental disabilities

VOLUNTEER APPLICATION

Name: _____ Phone: (____) _____

Address: _____
street Apt. # city state zip

Emergency Contact: _____ Phone: (____) _____

Email address: _____ Cell: (____) _____

Do you have a medical condition which may limit you from doing certain kinds of work? Yes No

If so, please list conditions and limitations: _____

How did you learn about Lifehouse? Friend News Event Community Fair

Court Referral Walk-In Other (please list): _____

What is your employment status: Employed Not Employed Self Employed

Retired Student/Other Type of work: _____

Personal/Professional Skills Assessment: (please check all that apply)

Computer Skills:

- IBM-PC Macintosh
- Word processing
- Data entry
- Desktop Publishing
- Programming
- Graphics

Development Skills:

- Proposal Writing
- Fund-raising
- Budget Development
- Public Relations
- Publications
- Special Events

Phone Skills:

- Information & Referral
- Solicitation & fund-raising
- Receptionist work/ability

Creative Skills:

- Photography
- design/layout

Event Planning:

- Donation Solicitation
- Budget Evaluations

Training Skills:

- Cooking
- Reading
- Home Economics
- Creative Arts

Office Skills:

- Bulk mailings
- Typing
- Filing
- Bookkeeping
- Clerical support

Repair Skills:

- Carpentry
- Home Improvement
- Auto Mechanics
- Landscaping
- Computers

Social Skills:

- Coaching
- Mentor Programs
- Buddy Programs

Please list other skills below:

Please list your ideal volunteer jobs: _____

WHAT IS YOUR SCHEDULING AVAILABILITY?

Circle the best times for you to volunteer within the appropriate days of the week:

MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
9:00 a-1:00 p	9:00 a-1:00 p	9:00 a-1:00 p	9:00 a-1:00 p	9:00 a-1:00 p	9:00 a-1:00 p	9:00 a-1:00 p
10:00 a-2:00 p	10:00 a-2:00 p	10:00 a-2:00 p	10:00 a-2:00 p	10:00 a-2:00 p	10:00 a-2:00 p	10:00 a-2:00 p
12:00 p-4:00 p	12:00 p-4:00 p	12:00 p-4:00 p	12:00 p-4:00 p	12:00 p-4:00 p	12:00 p-4:00 p	12:00 p-4:00 p
1:00 p-5:00 p	1:00 p-5:00 p	1:00 p-5:00 p	1:00 p-5:00 p	1:00 p-5:00 p	1:00 p-5:00 p	1:00 p-5:00 p
9:00 a-5:00 p	9:00 a-5:00 p	9:00 a-5:00 p	9:00 a-5:00 p	9:00 a-5:00 p	9:00 a-5:00 p	9:00 a-5:00 p
<i>Other:</i>	<i>Other:</i>	<i>Other:</i>	<i>Other:</i>	<i>Other:</i>	<i>Other:</i>	<i>Other:</i>
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My schedule changes every week but I can call to inform you of my weekly schedule on: _____  
(day of week)

**For COURT REFERRED volunteers ONLY**

HOW MANY HOURS are you required to work: _____

DEADLINE for when your hours should be completed for the courts? _____

**FOR OFFICE USE ONLY:**

Preliminary volunteer assignment: _____

Staff person overseeing project: _____ Department: Development

Notes: _____

**Interviewed By:** _____ **Date:** _____

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