



# 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 Volunteer Experience (Organization/Responsibility/Dates)

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

### Please List Your Employment & Training

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

### Which Volunteer Roles Are You Interested In? (Check All That Apply)

- |   |  |
|---|--|
| <input type="checkbox"/> Childcare Groups             | <input type="checkbox"/> Front Desk/Office Work            |
| <input type="checkbox"/> Donation Organization        | <input type="checkbox"/> Special Events                    |
| <input type="checkbox"/> Outdoor/Indoor Cleaning      | <input type="checkbox"/> Community Outreach & Distribution |
| <input type="checkbox"/> Other (Please specify) _____ |  |

### I Am Interested In Volunteering For (Check All That Apply)

- 1-Time events (low-commitment)       Short-medium term projects       Regularly scheduled hours

**What Attracts You To Volunteering at The Friendship Center?**

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**What Are Your Hobbies and Interests?**

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**Please List Your Skills/Qualities That You Will Bring To The Roles You Are Interested In:**

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**AVAILABILITY**

Days Available For Work:

- Monday    Tuesday    Wednesday    Thursday    Friday    Saturday    Sunday

Times Of Day Available For Work:

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Total Hours Available For Work: Weekly? \_\_\_\_\_ Monthly \_\_\_\_\_

**EMERGENCY CONTACTS**

1. Name: \_\_\_\_\_ Phone Number \_\_\_\_\_

1. Name: \_\_\_\_\_ Phone Number \_\_\_\_\_

**REFERENCES**

1. Name: \_\_\_\_\_

Telephone: \_\_\_\_\_

Relationship: \_\_\_\_\_

2. Name: \_\_\_\_\_

Telephone: \_\_\_\_\_

Relationship: \_\_\_\_\_

**SIGNATURE**

Declarations: I affirm that all statements herein are true and accurate to the best of my knowledge and my ability to answer, and I authorize The Friendship Center to check my education, employment and community service background 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](mailto:officem@thefriendshipcenter.org)