

Volunteer Application

For Office Use Only		
Reviewed: Date:		
CR: Y: □ N: □ Date:		
D: 🗆 A: 🗆		
SI Date Called:		
SI Date: SI Time:		

Our organization encourages the participation of volunteers who support our mission. If you agree with our mission and are willing to be interviewed and trained in our procedures, we encourage you to complete this application. The information on this form will be kept confidential and will help us find the most satisfying and appropriate volunteer opportunity for you.

Thank you for your interest in	our organization!				
Legal Name:		Male □ Female □ Other □			
Preferred Name:		Date of Birth (MM/DD/YYYY):			
Address:					
City:	State:	Zip:			
Phone:	Email:				
Employer:	Position:				
Emergency contact Name:	Relationship to You:				
Phone:					
What is your educational/train	ning background? Incl	ude any degrees/certifications pursued/attained.			
Have you had any previous exwork did you do?	sperience as a volunte	er? If so, with what organization, and what type of			
How did you learn about volu □ Flyer □ Presentation □ Frien	<u> </u>	er for Family Outreach?			
How long can you commit to	volunteering? □ Once	e □ Occasionally □ 6–12 months □ 12+ months			
What days and times are you	available? (Mentorin	g will be after school and weekends)			

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Mornings 8:00-12:00							
Afternoon 12:00-5:00							
Evening 5:00-9:00							

In what areas would you like to v	olunteer with us? Please check areas of interest					
[_] KEY Mentoring Program - Coac	ching students who need assistance in completing their diversion					
program successfully (e.g. Homework	help, goal setting, pro-social activities, etc.).					
[_] Tutoring - Are you someone who	loves to help students with homework? We have students who					
need your assistance!						
[_] Enrichment Programs –We are looking for those interested in teaching yoga, dance, voice lessons,						
cooking, painting/pottery and drawing,	, etc.					
[_] Special Events/Fundraising—We	need volunteers to assist with event planning and fundraising.					
[_] Marketing- If you have technical	and graphic skills with social marketing, design, and community					
development regarding marketing, we need you for development of newsletters, e-blasts and flyers.						
[_] Building Maintenance – Handym	an needed to help with maintenance projects around The Center,					
building shelves, fixing doors, and ligh	nt maintenance duties.					
Why are you interested in volunteeri	ing at this time?					
What experience do you have as a volu	inteer?					
If interested in mentoring, what experie	ence do you have working with youth?					
Do you have any special needs or restr	ictions?					
References: One non-family member						
Reference (Professional)						
Name:	Title/relationship:					
Years known:	Phone number:					
Reference (Personal)						
Name:	Title/ relationship:					
Years known:	nown: Phone number:					
After we review your application, you	will be contacted to schedule an interview.					
By signing this form, you attest that the	e information provided above is true.					
Signature:	gnature: Date:					

SUBMIT APPLICATION VIA: Email info@tcffo.org or Fax to 970-495-0114 attention Mentoring Coordinator or mail to 1100 Poudre River Dr. Suite B Fort Collins, CO 80524