



REBUILDING LIVES, RESTORING HOPE

## Volunteer/Intern Application

**Last Name:** \_\_\_\_\_ **First Name:** \_\_\_\_\_ **MI**

**Full Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Is this address:** Home?  Business?  Temporary?

**Home Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Emergency Contact:** \_\_\_\_\_

**Name:** \_\_\_\_\_

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

**Full Address:** \_\_\_\_\_

**Phone Number:** \_\_\_\_\_

**Let us know why you are interested in volunteer opportunities at T.R.A.P.A.**

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**What training or formal education have you had that might help you volunteer/intern with us?**

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**Are you presently attending school? Yes \_\_\_ No \_\_\_**

**Will you receive academic credit for your volunteer/intern work? Yes\_\_  
No\_\_**

**Are there any tasks or work that you would not be able to perform as a volunteer/intern?**

Yes\_\_\_ No \_\_\_ If yes, please specify:

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**Have you ever been convicted of a felony?** Yes \_\_\_\_ No \_\_\_\_

**If yes, please specify:**

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**How did you learn about the volunteer/intern program at T.R.A.P.A.?**

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**Does your employer match your volunteer/intern hours with donations of money or in-kind services?**

Yes \_\_\_ No \_\_\_

**Time Availability**

Note: We ask our volunteers/intern to make an initial six-month commitment to the program.

How many hours per week are you available?

If you do not want a weekly schedule, what is your preference?

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Indicate in the blocks below the times you most prefer to volunteer/intern: **Morning, Afternoon, Evening, or Anytime**

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
_____	_____	_____	_____	_____	_____	_____

**\*\* Please note times scheduling may vary due to capacity changes\*\***



**Volunteer Interests and Skills Survey**

Arts & Crafts \_\_\_ Sewing/Quilting \_\_\_\_\_ Mindfulness Activities \_\_\_ Drawing/Painting \_\_\_\_\_

Organizing Events \_\_\_ Support Groups \_\_\_ Healing/Restorative Yoga \_\_\_ Photography \_\_\_\_\_

**Administrative/Technical:**

Financial \_\_\_ Budgeting \_\_\_ Financial Planning \_\_\_ Grant Writing/Fundraising \_\_\_

Public Relations \_\_\_ Graphic Design \_\_\_ Public Speaking \_\_\_ Marketing \_\_\_

Technical Skills \_\_\_ Computer Programming \_\_\_ Computer Instruction \_\_\_ Videography \_\_\_

Outreach/Advocacy \_\_\_ Legislative Issues \_\_\_ Community Organizing \_\_\_

Office/Clerical \_\_\_ Data Entry \_\_\_ Filing \_\_\_ Answering Phones \_\_\_





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**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_