



## VOLUNTEER APPLICATION FORM

Please fill out and return to the address at the end of the application form...

**For office use only:**

Interviewer: \_\_\_\_\_ Interview Date: \_\_\_\_\_

Follow up Notes: \_\_\_\_\_

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

Name: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

e-mail: \_\_\_\_\_ Fax: \_\_\_\_\_

1. How did you hear about Jessie's Hope?

2. What interests you about volunteering with Jessie's Hope?

3. What do you hope to gain personally from volunteering?

4. What would make you feel like you have been successful?

5. Have you or has anyone close to you struggled with eating or weight disturbance issues? Please explain:

6. Describe the strengths you bring to volunteer work.

7. What have you enjoyed most about previous volunteer positions?

8. What have you enjoyed least about previous volunteer positions?

9. Do you prefer to work on your own, with a group, or with a partner? Why?

10. Describe a situation at any work/school environment in which you were faced with conflict. How did you deal with it?

11. What experience do you have working with people of diverse populations?

12. How will volunteering fit with your current schedule?

13. Please check off the areas in which you have education, work experience, skills and/or general interest:

- |                                                            |                                                       |                                                    |                                                           |                                                    |
|------------------------------------------------------------|-------------------------------------------------------|----------------------------------------------------|-----------------------------------------------------------|----------------------------------------------------|
| <input type="checkbox"/> Marketing Committee Member        | <input type="checkbox"/> Fundraising Committee Member | <input type="checkbox"/> Programs Committee Member | <input type="checkbox"/> Human Resources Committee Member | <input type="checkbox"/> Policies Committee Member |
| <input type="checkbox"/> Writing – Press Releases/articles | <input type="checkbox"/> Special Events               | <input type="checkbox"/> Advisory Council          | <input type="checkbox"/>                                  | <input type="checkbox"/> Financial                 |
| <input type="checkbox"/> Newsletter                        | <input type="checkbox"/> Research                     | <input type="checkbox"/> Public Speaking           | <input type="checkbox"/>                                  | <input type="checkbox"/> Administrative            |
| <input type="checkbox"/> Website                           | <input type="checkbox"/> Membership                   | <input type="checkbox"/> Train the Trainer         | <input type="checkbox"/>                                  | <input type="checkbox"/> Research                  |
|                                                            | <input type="checkbox"/> Donations                    | <input type="checkbox"/> Program Development       | <input type="checkbox"/>                                  | <input type="checkbox"/> Board of Directors        |

Thank you!

Please return the completed form to Jessie's Hope office