

# The Harbor Volunteer Application

**Contact Information: (Please print)** Must be at least 18 years of age

First Name: \_\_\_\_\_, Last Name: \_\_\_\_\_

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

Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ (Please circle one) Home Mobile Work

Alt Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ (Please circle one) Home Mobile Work

Email: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

What is the best way / time to contact you? \_\_\_\_\_

## **Occupation & Skills**

Please Circle your occupational status:

Employed      Unemployed      Retired      Homemaker      Student      Other

If you are employed or a student, where do you work / attend school?

\_\_\_\_\_

How did you hear about The Harbor? \_\_\_\_\_

Briefly describe your interest in volunteering with The Harbor: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Briefly describe any employment, or church or human service volunteer experience that you have had, which might relate to your service at The Harbor: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Availability**

Please Circle the day(s) you are available to volunteer from 10:00 AM until 2:00 PM

Monday            Tuesday            Wednesday            Thursday (Split shifts are available)

How many days a week / month would you like to volunteer? \_\_\_\_\_

**Type of Service**

Tell us in which areas you are interested in volunteering (circle all that apply):

Check-in                      Lunch / kitchen attendant                      Shower Monitor (need male & female)

Washing Towels                      As needed

**Emergency Contact**

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone Number (two if possible): \_\_\_\_\_

Doctor: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Are there any medical conditions that we should be aware of? \_\_\_\_\_

\_\_\_\_\_

**Agreement & Signature**

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that I will not be paid for my services as a volunteer. By signing below, I give The Harbor permission to speak with my congregation representative for The Harbor about my application (or someone else whom I list below.)

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

**References**

Congregation name affiliated with: \_\_\_\_\_

Reference submitted by Harbor congregation representative

Name: \_\_\_\_\_ Number: \_\_\_\_\_

Other Reference chosen by applicant

Name: \_\_\_\_\_ Number: \_\_\_\_\_

**Thank you for applying to be a volunteer with The Harbor!**

**For Office Use (Harbor Volunteer App REV 6-15)**

Date application was received by The Harbor: \_\_\_\_\_

Date that applicant's Harbor congregation representative or other reference was contacted:

\_\_\_\_\_

Date of applicant's interview: \_\_\_\_\_

Date of notification of acceptance: \_\_\_\_\_

Training that volunteer completed (ongoing) below: