



MANNA Volunteer Information Sheet

Contact Information	
Name	
Street Address	
City ST ZIP Code	
Home Phone	
Cell Phone	
Work Phone	
E-Mail Address	
Church (if applicable)	
Date of Birth	

Availability	
During which days/hours are you available for volunteer assignments?	
Monday mornings	Monday afternoons
Tuesday mornings	Tuesday afternoons
___ Wednesday mornings	___ Wednesday afternoons
___ Thursday mornings	___ Thursday afternoons
Friday mornings	Friday afternoons
___ Saturday mornings	___ Saturday afternoons

Interest	
Tell us in which areas you are interested in volunteering	
Assistance Program	Events/Fundraising
Food Pantry	Resale Store (Cashier; Infants; Toys; Women's; Men's; Housewares; Seasonal; Linens; Floor; Electronics; Other)
Vision Center	Other

Special Skills or Qualifications	
Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports.	

Other Information	
Have you ever been convicted of a crime? If yes, please explain the nature of the crime and the date of the conviction and disposition. Conviction of a crime is not an automatic disqualification for volunteer work.	
Do you have a driver's license? Please circle	Yes No
Do you have car insurance? Please circle	Yes No

Person to Notify in Case of Emergency	
Name	
Home Phone	
Cell Phone	
Work Phone	
Relationship	
Is there ANYTHING we should know, i.e. meds allergic to?	

Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

Thank you for completing this application form and for your interest in volunteering with us.

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

As a volunteer of MANNA, I agree to abide by the policies and procedures. I understand that I will be volunteering at my own risk and that the organization, its employees and affiliates, cannot assume any responsibility for any liabilities for any accident, injury or health problem which may arise from any volunteer work I perform for the organization. I agree that all the work I do is in a volunteer basis and I am not eligible to receive any monetary payment or reward.

Name (printed)	
Signature	
Date	

Effective
02/2013