



VOLUNTEER APPLICATION

Office Use Only	___ Picture for DB	___ Parental/Guardian Consent
___ Background Check CCAP	___ Nametag	___ Car Insurance
___ References Checked	___ Confidentiality Signed	
___ Received Volunteer Handbook	___ Volunteer Database	
___ Orientation/Tour	___ Mailing Database	

First Name:	MI:	Last Name:
Address/City/Zip Code:		
Phone Number(s):		
Email Address:		Date of Birth:

Recent Employment History	Dates	Description of Work
Volunteer History	Dates	Description of Work

Availability: Please be specific in the hours you are available					
Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
___ to ___	___ to ___	___ to ___	___ to ___	___ to ___	___ to ___
___ to ___	___ to ___	___ to ___	___ to ___	___ to ___	___ to ___

How often are you interested in volunteering?

- ___ 1 day per Week ___ Monthly ___ As needed (sub) ___ Undecided

REFERENCES

(Please do not include family members)

Name: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Email address: _____ (required if available)

Relationship to Applicant: _____

Name: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Email address: _____ (required if available)

Relationship to Applicant: _____

Name: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Email address: _____ (required if available)

Relationship to Applicant: _____

Please check all volunteer opportunities that you are interested in.

COMMUNITY CONNECTIONS

Support Services	
<input type="checkbox"/> Companionship	<input type="checkbox"/> Raking/bagging leaves
<input type="checkbox"/> Transportation	<input type="checkbox"/> Yard work (lawn mowing, trimming)
<input type="checkbox"/> Light housekeeping	<input type="checkbox"/> Shoveling

Dunn County Home Repair Collaborative	
<input type="checkbox"/> Small home repairs	<input type="checkbox"/> Electrical
<input type="checkbox"/> Wheelchair ramps (building with a team)	<input type="checkbox"/> Plumbing

FOOD PANTRY

Pantry/Warehouse		
<input type="checkbox"/> Client intake (on computer)	<input type="checkbox"/> Shopping area (assisting clients w/ food choices)	<input type="checkbox"/> Help with occasional weekend food drives (collecting, sorting)
<input type="checkbox"/> Stocking		

Food Pick-up & Deliveries		
<input type="checkbox"/> Homebound pantry client food deliveries (any size vehicle)	<input type="checkbox"/> Project SAM deliveries to elementary schools (weekend kids' meal bags) Need pick-up truck/van	<input type="checkbox"/> Donated food pick-ups (Walmart, Kwik Trip, Marketplace, Caribou, etc.) Need pick-up truck/van

SHELTER

Broadway Shelter

<input type="checkbox"/> Apartment cleaning	<input type="checkbox"/> Lawn mowing	<input type="checkbox"/> Shoveling	
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Winter Haven

Winter Haven is an overnight shelter for homeless adults which is open November 15th through March 31st. Duties include registering guests, offering of food, light clean up, and visiting with guests.

<input type="checkbox"/> 1 st Shift (7:30pm - 1:30 am)	<input type="checkbox"/> 2 nd Shift (1:30am - 7:30am)
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Please continue application on the next page->

GENERAL AGENCY

___ Reception & office	___ Snow shoveling	
___ Special events	___ Bulk mailings (stuffing envelopes)	___ Lawn mowing
___ Cleaning	___ Gardening	

Committees		
___ Education & Advocacy	___ Program Development & Evaluation	___ Development (fundraising & marketing)

EMERGENCY INFORMATION In case of an emergency, please notify:

Name: _____ Relationship: _____

Contact Numbers: (H) _____ (W) _____ Cell: _____

Please list any physical limitations you may have:

Do you have a valid driver's license? Yes/No

Do you have liability insurance? Yes/No

I certify that the answers given on this application are true and complete to the best of my knowledge.
I authorize Stepping Stones of Dunn County to conduct a criminal record check.

Signature: _____ Date: _____

Please email your completed application to communityconnect@steppingstonesdc.org or drop it off at:

Stepping Stones of Dunn County
1602 Stout Road
Menomonie, WI 54751
Ph. (715) 235-2920