

Office Use Only

____ Background Check
____ References Checked
____ Schedule Sent
____ Date Hours Started

____ Received Volunteer Handbook
____ Confidentiality Form Signed
____ Guardian Consent Signed
____ Date Hours Completed

____ Orientation/Tour
____ Picture for Database
____ Entered into Database

VOLUNTEER APPLICATION

Please Marker Which Volunteer Position You Are Applying For:

____ Student Volunteer
____ Court Ordered Community Service
____ Other Community Member



Name: _____

Address: _____

City: _____ Zip Code: _____

Phone: _____

Birthdate: _____ Gender Identity/Pronouns: _____

Email: _____

Current Employment or Place of Retirement	<u>Dates</u>	<u>Description of Work</u>
Volunteer History	<u>Dates</u>	<u>Description of Work</u>

References (Please do not include family members. We are not able to use family members as a reference)

Name: _____

Name: _____

Phone: _____

Phone: _____

Email: _____

Email: _____

Relationship to you: _____

Relationship to you: _____

IN CASE OF AN EMERGENCY, PLEASE NOTIFY:

Name: _____

Phone: _____

Relationship to you: _____

What hours are you available?

Monday: _____ to _____

Tuesday: _____ to _____

Wednesday: _____ to _____

Thursday: _____ to _____

Friday: _____ to _____

Saturday: _____ to _____

Do you need a certain number of hours for a class or for community service?

(If community service, please specify charges. If for a class, please specify which class.)

How many hours are needed? _____ Date hours need to be completed: _____

**** We may be unable to have you as a volunteer due to the nature of criminal charges and available volunteer opportunities. ****

Are you interested in being on one of our committees?

Education & Advocacy: _____

Development (Fundraising & Marketing): _____

Program Development & Evaluation: _____

Please Mark All Volunteer Opportunities You Are Interested In

- Pantry Distribution _____
- Pantry Intake _____
- Stocking the pantry _____
- Reception Desk _____
- Agency Cleaning _____
- Shelter apartment cleaning (to get ready for the next family to move in) _____
- Visiting with Cairn House Guests _____
- Picking up food from local churches on weekdays _____
- Weekend food preparation for guests (evening meal only) _____
- Mowing _____
- Shoveling/Snow blowing _____
- Gardening / Weeding _____
- Pick-ups/deliveries driving our commercial pantry truck (24ft box; no CDL required) _____
- Food deliveries to homebound clients _____
- Pop-Up Pantry on-site help: ___Colfax ___Downsville ___Ridgeland
 ___Rock falls ___Elk Mound ___Sand Creek
- Pop-Up Driver – driving our commercial pantry truck (24ft box; no CDL required) _____
- Donated food pick-ups (Kwik Trip, Dick’s Fresh Market, etc.) Truck or van needed _____
- Mailings (stuffing envelopes) _____
- Small home repairs; please list your skills. _____

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 a.metoxen@steppingstonesdc.org or drop it off at:
1602 Stout Rd Menomonie WI 54751