

Boyertown Area Multi-Service

200 W. Spring Street, Boyertown, PA 19512 AND Ricketts Center - 658 Beech Street, Pottstown, PA 19464

Volunteer Application

The information provided on this form will be kept confidential within the Boyertown Area Multi-Service and only released with approval from the volunteer or when required by law or regulations.

First Name: _____ Last Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Township: _____ County: _____

Cell Phone: _____ Home Phone: _____

Email address: _____

Date of Birth: ____/____/____

Emergency Contact Name: _____

Relationship: _____ Phone: _____

Are you working Full-time or Part-time? _____ Are you retired? _____

Are you a student? ____ If yes, what grade? _____ What school/college? _____

Employer/Company Name: _____ Title: _____

What is your educational background? _____

What skills have you gained from your life or work experience that you would like to use in a volunteer position? _____

What are your interests and hobbies? _____

Please tell us why you would like to volunteer: _____

What type of volunteer work would you like to do/learn more about? (check all that apply)

- | | | |
|--|---|--|
| <input type="checkbox"/> APPRISE | <input type="checkbox"/> Meals on Wheels delivery | <input type="checkbox"/> tax prep program |
| <input type="checkbox"/> clerical/typing/data entry | <input type="checkbox"/> Meals on Wheels prep | <input type="checkbox"/> Center at Spring Street |
| <input type="checkbox"/> committees | <input type="checkbox"/> Preston's Pantry (food pantry) | <input type="checkbox"/> Wellness programming |
| <input type="checkbox"/> fundraising | <input type="checkbox"/> Ricketts Center | <input type="checkbox"/> wherever the need is |
| <input type="checkbox"/> kitchen help | <input type="checkbox"/> Speakers' Bureau | <input type="checkbox"/> greatest/I'd like to learn more |
| <input type="checkbox"/> mailing - labels and stuffing | <input type="checkbox"/> Special events | |

Availability - what days and times are you available? Except for special events, we are not open during the weekends.

Monday _____ Tuesday _____ Wednesday _____
Thursday _____ Friday _____ Saturday _____
Sunday _____

A requirement of volunteerism is to complete criminal and child abuse background checks. Have you ever been convicted of a felony or misdemeanor crime? _____
If yes, please explain: _____

Are you required to perform community service for school? If so, how many hours and by when? _____

Have you been court-appointed to complete community service hours? If so, how many hours and by when? _____

I acknowledge that all of the information on this application is correct. By submitting this application, I agree to abide by the policies and procedures of Boyertown Area Multi-Services and its programs, including The Center at Spring Street, Meals on Wheels, Preston's Pantry, Ricketts Center, and the Wellness Council. I am aware that Boyertown Area Multi-Service conducts background checks on volunteers and I will comply with this request. I understand that depending on the result of the background check, my role as a volunteer may be required to change.

Volunteer's Signature

Date Signed

Parent's Signature, if volunteer is under 18

Date Signed

Volunteer Coordinator's Signature

Date Signed