

Boyertown Area Multi-Service

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



Volunteer/Intern Application



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

First Name: _____

Over or Under 18 years of age? (*circle one*)

Last Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Township: _____ County: _____

Cell Phone: _____ Home Phone: _____

Email address: _____

Preferred Method of Contact: Home/ Cell/ Text/ Email/ US Mail (*circle one*)

Emergency Contact Name: _____

Relationship: _____ Phone: _____

Are you working full-time or part-time? _____ Are you retired? _____

Do you volunteer anywhere else? If so, where? _____

Employer/Company Name: _____ Title: _____

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

Questionnaire

1. What is your educational background? _____

2. Do you have any formal education: a degree/ license/ training/ certification? If so, in what: _____
3. What skills have you gained from your life or work experience that you would like to use in a volunteer position? _____

4. What are some job duties, tasks, and work responsibilities you are experienced in? _____
5. What skills/competencies would you like to bring to our organization? _____
6. What volunteer role would you like to assist in? _____
7. Are you flexible in changing volunteer roles from time to time? _____
8. What are your interests and hobbies? _____
9. What is your greatest strength? _____
10. What is an example of an area you can work on? _____
11. Do you speak any languages other than English? If so, which one(s): _____
12. Please tell us why you would like to volunteer: _____
13. When would you like to start volunteering? _____
14. What's your volunteer availability? _____
15. How frequent would you like to volunteer? _____

16. Are you flexible with working at the Pottstown or Boyertown location? _____

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

- | | |
|---|--|
| <input type="checkbox"/> Administration- clerical/typing/data entry | <input type="checkbox"/> Meals on Wheels Prep |
| <input type="checkbox"/> Committees | <input type="checkbox"/> Ricketts Center |
| <input type="checkbox"/> Fundraising | <input type="checkbox"/> Speakers' Bureau |
| <input type="checkbox"/> Kitchen Help | <input type="checkbox"/> Special Events |
| <input type="checkbox"/> Mailing- labeling and stuffing envelopes | <input type="checkbox"/> Tax Prep Program |
| <input type="checkbox"/> Preston's Pantry | <input type="checkbox"/> Center at Spring Street (Senior Center) |
| <input type="checkbox"/> Food Drive Events | <input type="checkbox"/> Wellness Programming |
| <input type="checkbox"/> Meals on Wheels delivery | <input type="checkbox"/> Human Resources |
| <input type="checkbox"/> Accounting | <input type="checkbox"/> Social Media |

18. A requirement of volunteerism/ internships is to complete background record checks. Will you permit our organization to conduct a background record check? (*circle one*) yes or no

19. Are you required to perform volunteer/ intern hours for school or college. If so, how many and by when: _____

20. Have you ever been convicted of a felony or misdemeanor crime? (*circle one*) yes or no
If yes, please explain: _____

A felony/misdemeanor does not necessarily disqualify you from volunteering within our organization.

21. If applicable, please answer the following questions:

Court Ordered Only

1. Have you ever been convicted of a felony or misdemeanor crime? _____

If so, when: _____ If yes, please explain: _____

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

22. Do you have two forms of current identification that proves you are a U.S. Citizen or legal to work in the U.S. and a document that establishes your identity? (*school ID is acceptable*)

Please provide these forms to the volunteer coordinator.

(*circle one*) yes or no

I acknowledge that all information on this application is correct. By submitting this application, I agree to abide by the policies and procedures of Boyertown Area Multi-Service 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 and I will comply with this request. I will also complete a background Attestation Acknowledgment which is attached. I am aware periodically background record checks will be conducted. 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

