

Volunteer Application



Contact Information

Name	
Street Address	
City ST ZIP Code	
Primary and Secondary Phone (H, W, C)	
E-Mail Address	

Optional

You may optionally provide the following information:

Age: 18-25 26-35 36-45 46-55 56-65 65+
Race: African American Caucasian Native America Pacific Islander Asian Latino Other

Why are you interested in volunteering at My Sister's Place?

How did you hear about us?

MSP Facebook Page MSP Website MSP staff/volunteer, who _____ or Other

Are you able to communicate in any language besides English? If yes, what language?

Availability

During which hours are you available for volunteer assignments? – check all that apply

	Day	Evening
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Weekends		

Interests

Tell us in which areas you are interested in volunteering

Children's Program Shelter Beautification/Upkeep
 Women's Group or Support Kitchen/Meals Support
 Special Events Other

Special Skills or Qualifications

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

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Previous Volunteer Experience

Do you have previous experience in working with families affected by domestic violence or other women's/family issues? Answering "none" to this question is fine.

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Person to Notify in Case of Emergency

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone	
E-Mail Address	

Agreement and Signature

By submitting this application, I fully understand the above questions and certify that all information provided is true and accurate to the best of my knowledge. I grant consent to MSP to verify its accuracy as well as to contact the references I have listed to determine my suitability for a volunteer position with MSP. I release MSP and all others from liability in connection with the verification of this information.

Name (printed)	
Signature	
Date	

References

Please provide three professional or personal contacts to include: Name, Phone Number, Email, Years Known and Nature of the relationship.

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 My Sister's Place. Please email completed application to tharvey@mysistersplacedc.org.