**Volunteer Application Form for Non-profit**

**Thank you for your interest in volunteering with our non-profit organization! Your participation helps us achieve our mission. Please complete this form to get started.**

**Personal Information**

* **Full Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State: \_\_\_\_\_\_\_\_\_\_\_ Zip: \_\_\_\_\_\_\_\_\_\_\_\_**
* **Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Volunteer Opportunities**

1. **Which areas are you interested in volunteering for?
☐ Fundraising
☐ Administrative Support
☐ Event Planning
☐ Social Media/Marketing
☐ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
2. **Availability:**
	* **Days: ☐ Weekdays ☐ Weekends ☐ Flexible**
	* **Hours per Week: \_\_\_\_\_\_\_\_\_\_**

**Skills and Experience**

| **Skills** | **Proficiency Level** | **Willing to Train** |
| --- | --- | --- |
| **Graphic Design** | **☐ Advanced** | **☐ Yes** |
| **Fundraising** | **☐ Beginner** | **☐ Yes** |
| **Volunteer Coordination** | **☐ Intermediate** | **☐ Yes** |
| **Social Media Marketing** | **☐ Beginner** | **☐ Yes** |

**References**

1. **Reference Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Agreement
I acknowledge that the information provided is true and accurate. I consent to a background check if required.
Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: //\_\_\_\_\_\_**