



# PORT CHARLOTTE

## VOLUNTEER APPLICATION

*(Please print)*

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

Date of Birth \_\_\_\_\_ Gender (circle one)    MALE    FEMALE

Former Work/Occupation \_\_\_\_\_

Most Recent Employer (optional) \_\_\_\_\_

Skills (List skills and indicate proficiency level)    SKILLED    CAN TEACH    AMATEUR

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Languages (indicate proficiency level)    FLUENT    READ    WRITE

1. \_\_\_\_\_

2. \_\_\_\_\_

**Volunteer Availability (circle all applicable)**

Number of days per week:    1    2    3    4    5    Days:    M    T    W    Th    F    No preference

**Area(s) of Interest (circle all applicable)**

Christmas    Food pantry    Thrift store    Kitchen    Reception    Special Events    Disaster

**Emergency Contact Info**    First Name \_\_\_\_\_    Last Name \_\_\_\_\_

Address \_\_\_\_\_    City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_    Email \_\_\_\_\_

Volunteers hereby agree to serve individuals without discrimination.

\_\_\_\_\_  
*Volunteer Signature*

\_\_\_\_\_  
*Staff Signature*

\_\_\_\_\_  
*Date*