



P O Box 37129
Oak Park, MI 48237
(313) 861-3221 Telephone
(313) 861-3223 Fax

VOLUNTEER APPLICATION

Name: _____ Phone _____

Address: _____

Email Address: _____ @ _____ DL# _____

Social Security Number _____ Best Time to Contact _____

Relevant Experience and/or Employment (attach a resume if relevant)

Why are you interested in our organization? _____

Area(s) of expertise/Contribution you feel you can make

Other volunteer commitments _____

What Committees are of interest to you? Please Circle no more than two.

- | | | | |
|---------------------------------|----------------|---------------------|-----------------|
| Fundraising | Finance | Marketing | Volunteer |
| Clerical/Administrative Support | | Supportive Housing | Grant Committee |
| Client Services | Advisory Board | Crisis Intervention | |

Signature: _____ Date: _____

Do Not Complete Below this Line. For Volunteer Coordinator Only: _____

Date of Orientation: _____ Orientation Completed By _____