

Volunteer Application

Contact Information

Full Name	
Street Address	
City/ Province/ Postal Code	
Home Phone	
Work/ Cell Phone	
E-Mail Address	
Date of Birth	

Availability

During what times/ dates of the year are you unable to volunteer?

During which hours are you available for volunteer assignments?

- Weekday mornings Weekend mornings
 Weekday afternoons Weekend afternoons
 Weekday evenings Weekend evenings

Interests

Tell us in which areas you are interested in volunteering

- Administration
 Events
 Fundraising
 Other (please specify): _____
 Volunteer coordination

Why are you interested in volunteering with NLHHN? _____

How do you feel you would best contribute to NLHHN? Tell us more about yourself! _____

Special Skills or Qualifications

Please summarize any skills or qualifications you have obtained through school, previous employment or training. This can include anything including certifications, languages, and education.

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Previous Volunteer and Work-Related Experience

Do you currently volunteer with other organizations? If so list them here. Also, please include a list of previous volunteer/ work-related experience.

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Emergency Contact Information

Name	
Relation	
Home Phone	
Work/ Cell Phone	
E-Mail Address	

Agreement and Signature

Name (printed)	
Signature	
Date	

Parental Signature (If Under the Age of 18)

If you are under 18, please include a signature from a parent or guardian

Name (printed)	
Signature	
Date	

All volunteers must also provide a copy of a current criminal record check.

If you have any concerns or inquiries about this application, please contact (709)-722-1030 or send an e-mail to info@nlhhn.org. Thank you for your interest in volunteering with NLHHN and we will be in contact with you soon!