



PLEASE PRINT ALL INFORMATION CLEARLY.

Name: _____ Date _____

Mailing Address: _____ City, Zip: _____

Home Phone: _____ Email Address: _____

Cell Phone: _____ Birthdate (mm/dd/yyyy): _____

Any health concerns that the Food Shelf should be aware of: _____

Emergency Contact (Name, Relation to you and Phone Number): _____

Are you 16 years of age or older? (If not, we ask that you come with an adult.) Yes No

Required Information

Do you need community service hours? _____ If so, why? _____

**Please be aware that according to food shelf policy we are unable to assist with community service hours related to theft or violence.*

How did you hear about this volunteer opportunity? _____

Why are you interested in volunteering at the White Bear Area Emergency Food Shelf? _____

Past or present volunteer experience: _____

Can you make a 6-month commitment to volunteering at the Food Shelf? Yes No

Can you volunteer at least on an every other week basis? Yes No

Would you prefer to volunteer every week or every other week? Every week Every other week

At times, some of the volunteer positions require heavy lifting, up to 40 pounds.

Are you able to perform this job responsibility? Yes No

Do you give us permission to do a background check? Yes No

Do you speak a language other than English? If yes, which? _____

What is your speaking fluency? (circle one) Beginner Intermediate Advanced Fluent

Confidentiality Agreement

We ask that our volunteers keep all information on clients confidential. Are you willing to take on this responsibility of confidentiality of client information? Yes No

Optional – Many employers participate in Volunteer Grant Programs. The following information may help us access important financial support.

Faith Group/Church you belong to: _____

Community organizations you belong to: _____

Present or Previous Place of Employment: _____

Does your employer/corporation match funds for charitable organizations? Yes No

If so, they match for: Employee Service Hours Employee Financial Donations

I am interested in volunteering at the Food Shelf in the following area(s):

Food Shelf

- _____ Assisting neighbors with Market shopping
- _____ Sorting, organizing and stocking food
- _____ Pick-up/delivery of food donations
- _____ Work in the Community Roots Garden
- _____ Intake work assisting neighbors with resource needs

Greeter/Office Assistant

- _____ Greet neighbors, answer phones, make neighbor appointments, etc.
- _____ Data entry/computer work
- _____ Administrative/Support work

KID Pack Program (School Year Only)

- _____ Weekly delivery of KID Packs to schools

Other

- _____ Handyman for general projects

Please list any other skills that you would like to share with the Food Shelf:

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.

Photo Release

I give permission to the White Bear Area Emergency Food Shelf to use photos/videos that may include me or publication or to be kept on file for future publications. I hereby agree to allow the White Bear Area Emergency Food Shelf to use my image for promotional purposes.

Statement of Understanding

I verify that the information on this application is true, complete and correct and I understand that if it is not it will result in disqualification from working as a White Bear Area Emergency Food Shelf Volunteer. I agree to support the White Bear Area Emergency Food Shelf's mission of *providing food and support to our neighbors in need, in partnership with the communities of the White Bear Area. I also agree that my email may be used for official WBAEFS newsletter/communications.*

Signature: _____

Date: _____