



VOLUNTEER APPLICATION rev. 6-3-13

Date: _____

Name: _____

Street Address: _____ Apt #: _____ Zip: _____

Phone: _____ Email: _____

(If Youth Under 18) Date of Birth: _____

Languages spoken other than English: _____

(For Youth Only) Parent/Guardian Info:

Name: _____

Street Address: _____ Apt #: _____ Zip: _____

Phone: _____ Email: _____

Interests and Availability

Let us know your availability for volunteer assignments, and we will contact you to discuss further.

GOLDEN HARVEST FOOD PANTRY 745 Lafayette Avenue

Pantry duties may include stocking, food distribution, cleaning.

____ 9:30am to 12:30pm Tuesdays ____ 9:30am to 12:30pm Thursdays

GARDEN SITES (4 locations in Bed Stuy; let us know your availability, hours vary)

Garden duties may include watering, weeding, assisting with workshops, clean-up.

____ :____ to ____ :____ Mondays ____ :____ to ____ :____ Tuesdays
____ :____ to ____ :____ Wednesdays ____ :____ to ____ :____ Thursdays
____ :____ to ____ :____ Fridays

Special Skills or Qualifications

What skills or qualifications do you have as a volunteer, e.g. those acquired through employment, previous volunteer work, or other activities such as hobbies or sports?

Previous Volunteer Experience

Have you worked as a volunteer before? If so, what did you do?
