

# Volunteer Application



Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

**How did you find out about Life House Maine?**

Radio     Church     Internet     Friend     Other: \_\_\_\_\_

**Are You Involved with a Church Community?** Yes     No

Church? \_\_\_\_\_ Location: \_\_\_\_\_

**Emergency Contact:** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Relationship:** \_\_\_\_\_

**LEVEL 1 VOLUNTEERS** typically will not have direct contact with residents and are not required to have a background check.

- Errands & shopping tasks
- Diet and Food tasks
- Outdoor Grounds Maintenance
- Flower or Vegetable Gardening
- Construction or General Repairs
- Special Events,
- Grant Writing, or fundraising
- Host a home event (Baby Showers, Birthdays, etc.

**Level 1 Volunteer availability**

**Indicate the frequency of your desired schedule for Level 1 tasks:**

\_\_\_\_ Weekly    \_\_\_\_ Weekends Only    \_\_\_\_ Monthly    \_\_\_\_ As Needed

**Indicate your expected availability for Level 1 tasks. Check all that apply.**

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
7am-11am							
11am-3pm							
3pm-7pm							
7pm-11pm							
Overnight							

**Level 2 Volunteers** work directly with residents and are required to have a background check. You may volunteer for either or both levels.

- House Staffing (Regular & Supplemental Coverage)
- Teachers / Mentors
- Career Coaches

- Case Managers
- Drivers
- Other \_\_\_\_\_

**Indicate the frequency of your desired schedule for Level 2 tasks:**

\_\_\_\_ Weekly \_\_\_\_ Weekends Only \_\_\_\_ Monthly \_\_\_\_ As Needed

**Indicate your expected availability for Level 2 tasks. Check all that apply.**

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
7am-11am							
11am-3pm							
3pm-7pm							
7pm-11pm							
Overnight							

Please list any special interests, skills, hobbies, or other information about yourself that you believe would contribute to our mission. \_\_\_\_\_

Tell us how volunteering for Life House Maine will impact your life and how you hope to impact the lives of our moms. \_\_\_\_\_

**As a volunteer:**

- **I am aware of the core values of the program and will incorporate them into discussions as needed or appropriate.**
- **I am aware that the program does not extend workers compensation coverage to its volunteers.**
- **I understand the confidentiality statement and agree not to misuse any personal information I may have access to during my duties as a volunteer as outlined in the Volunteer handbook.**
- **I agree to disclose any criminal charges and convictions (either pending or final).**

Signature: \_\_\_\_\_

Date: \_\_\_\_\_