



Help From People to People, Inc. 121 West Nyack Road, Nanuet NY 10954 • 845-623-4900 • Fax 845-623-4912
www.peopletopeopleinc.org elyce@peopletopeopleinc.org

Volunteer Application 2017

I. Contact Information

Name: _____	Application Date: _____
Address: _____	Home Phone: _____
_____	Cell Phone: _____
E-mail: _____	Date of Birth: _____
Emergency Contact	
Name: _____	Phone: _____ Relationship: _____

Are you fulfilling a community service requirement? Yes No

If yes, reason for service: School Religion Court Other (please explain): _____

Number of Hours: _____ Completion Date: _____ Name of school/org/agency/court: _____

Address & Phone: _____

Youth Applicants (Age 14 and up):

* If you are under age 18, a parent/legal guardian must also sign your application.

* Youth under the age of 14 are invited to participate in a food drive or other service project.

Court Mandated Community Service:

* Must attach copy of court document indicating required service, and court contact information.

* 2 References required (p. 3)

* Court mandated community service at People to People is available once only per person.

Have you volunteered at People to People before? Yes No

If yes, please give approximate date(s) and reason for prior service: _____

Are you currently, or have you ever been a People to People client? Yes No

Have you ever been convicted of a criminal offense? Yes No

If yes, please explain: _____

Do you have any medical/physical limitations that might affect your volunteer placement? Yes No

If yes, please describe: _____

Are you able to lift items (up to 40 lbs.) in the Food Pantry? Yes No

How did you hear about People to People? _____

II. Check all volunteer opportunities that may be of interest:

Pantry:

- Bagging groceries
- Stocking shelves
- Sorting produce
- Inventory
- Cleaning
- Loading/Unloading deliveries
(requires ability to lift up to 40 lbs.)
- Folding/Hanging clothes
- Serving food bags to clients

Office:

- Computer, data entry
- Filing
- Mailings
- Photocopying
- Shredding
- Phones
- Front Desk/Client Services

Other:

- Fundraising
 - Food Drives
 - Event Planning
 - Driving for Food Pickups
 - Special Events (offsite)
 - Facility Maintenance/Repairs
- Seasonal Programs:**
- Project Joy (Dec)
 - Back to School (July/Aug)

Availability (check all that apply):

	Monday	Tuesday	Wednesday	Thursday	Friday
9:00 am - 1:00 pm					
1:00 – 5:00 pm					
Students 3:00-5:00 pm					

III. Background and Skills Please help us match your skills with our needs by filling out the information below:

Employment/School (check all that apply):

- I am currently employed Full Time Part Time
 Employer Name and Address: _____
 Current Position: _____ How long have you been employed here? _____
 Supervisor Name/Number: _____ May we call this person about you? Yes No
- I am retired
 Former Employer Name and Address: _____
 Last Position: _____ Number of years employed there: _____
- I am a student (Check **one** box and fill out appropriate information)
 Elementary Middle Jr. High High School College/Graduate School Name and Address:
 Name and Address of School: _____

 Age: _____ Grade: _____ Major: _____ Grad. Date: _____
- Other (please explain): _____

Languages Spoken (Check all that apply):

- English Spanish Creole French Other(s): _____

Please describe any other skills that you feel may be relevant to volunteering at People to People:

IV. Volunteer Experience

Have you ever volunteered anywhere else? Yes No

If yes, please describe one prior volunteer experience:

Agency: _____

Responsibilities: _____

Supervisor Name and Number: _____

May we call this person about you? Yes No

There are many local organizations that rely on volunteers, and we appreciate that you have chosen us. Please explain your reasons for wishing to serve at People to People:

Do you think volunteering in the local community should be required by all schools and employers? Why or why not?

Would you like to be notified of future volunteer opportunities by email? Yes No

V. References (Required for all applicants including youth)

Please select 2 people as references who know you well and are familiar with your professional, educational, or community service background. Do not select relatives, friends, classmates or coworkers.

***Acceptable references are people who have known you in a supervisory capacity such as present/past employers, teachers, coaches, academic advisors, clergy, volunteer supervisors, job coaches, etc.**

1. Name: _____ Position: _____

Company/School/Organization Name: _____

Address: _____ Phone: _____

E-mail: _____

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Company/School/Organization Name: _____

Address: _____ Phone: _____

E-mail: _____

VI. Volunteer Agreement (please initial each item on the line provided)

- 1) I understand that I volunteer at my own risk and should I be injured or become ill, People to People DOES NOT provide medical insurance coverage to volunteers. _____
- 2) I understand that any People to People information that I become aware of during the course of volunteering is confidential and may not be disclosed or discussed with others. _____
- 3) I hereby grant People to People permission to use my photograph for reproduction in promotional material or other media purposes. _____
- 4) I understand that while volunteering I am considered a representative of People to People and am expected to behave and dress appropriately at all times. I will be courteous and respectful to all staff, volunteers and clients. _____
- 5) I understand that I must personally sign in and out every time I enter and leave the premises, and that failure to do so will result in loss of hours for that day. _____
- 6) I understand that the use of cell phones, texting, headphones and all electronic devices is prohibited. _____
- 7) I have not been a client of People to People within the past year, nor have any of my immediate family members. _____
- 8) I understand that I must schedule my hours in advance, and inform People to People in a timely manner if I will be unable to serve at my scheduled time. _____
- 9) I understand that written confirmation of my volunteer hours is available and is valid within two years of service. _____
- 10) I understand that all donated items in the food pantry, including, but not limited to, food and clothing, are for People to People clients only. Volunteers may not eat or take any donated items. _____
- 11) I understand that People to People reserves the right to dismiss volunteers for reasons which include, but are not limited to: inappropriate behavior, taking donated items, or chronic lateness/absence. In the case of dismissal, credit for hours served will be at the discretion of the management. _____

I hereby certify that all the information I have provided is complete and accurate and that I have read the items above and agree to these terms in their entirety.

Print Name: _____ Signature: _____ Date: _____

Parent/Guardian (print): _____ Signature: _____ Date: _____
(If under the age of 18)

Please return your completed application to:

People to People
121 West Nyack Rd., Nanuet, NY 10954
Phone: 845-623-4900, x213 FAX: 845-623-4912
E-mail elyce@peopletopeopleinc.org
<http://www.peopletopeopleinc.org>

After submitting your application, please call Elyce Bristol, Program Manager at 845-623-4900, x213. Scheduling of hours will depend upon your availability and our volunteer needs. If we do not have anything available for you at the current time, please feel free to follow up with us again in a couple of months, as our volunteer needs are constantly changing. Orientation and training will be provided upon commencement of service.

Thank you for your interest in People to People!