

Flat Rock Community Center - Individual Volunteer Application

Today's Date ____/____/____

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone (H): _____ (O): _____ Birthday: ____/____/____

Emergency Contact: _____ Phone: _____

1. Background

Education _____ (optional) Current Occupation: _____ (optional)

Languages: English Others: _____

Are you required to do **court ordered community service**? Yes No

Are you a participant in a **government-sponsored program**? Yes No Which one? _____

Are you a student required to perform community service? Yes No Which School? _____

Number of hours to complete: _____ Date required by: _____

2. Physical Limitations

Are you taking any medications we should be aware of? _____

Do you have any **back problems**? Yes No **High blood pressure**? Yes No

How many pounds do you feel comfortable **lifting**, approximately? _____

Do you require (or prefer) a **seated volunteer position**? Yes No

3. Availability

Thursday Friday Saturday

How often? weekly monthly on-call short notice Number of hours _____

Are you willing to help with special events? _____

4. Interests

Please check off the interests that apply to you. If there are any areas where you do not want to be involved, just write **NO** next to the area.

Interests

- thrift store
- food pantry
- custodial work
- sorting food
- landscaping/yard work
- other (please explain) _____

5. Previous or Current Volunteer Experience

Please list any volunteer experience that you may have: _____

6. How did you hear about the Flat Rock Community Center?

Please mail this form to: FRCC, Misty Palmer – Director, 187 County Rd. 686, Flat Rock, AL, 35966

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For Office Use Only

Date Rec'd _____ Rec'd By _____ Orientation Tour _____ Assignment _____ Other _____