



YWCA OF MOUNT DESERT ISLAND
VOLUNTEER APPLICATION

CONTACT INFORMATION

Name _____
Street Address _____
City St Zip _____
Preferred Phone _____
Email Address _____

AVAILABILITY

During which hours are you available to volunteer?

___ Weekday mornings ___ Weekend mornings
___ Weekday afternoons ___ Weekend afternoons
___ Weekday evenings ___ Weekend evenings

INTERESTS

In which areas are you interested in volunteering?

___ Events, Cooking/baking, Childcare, Crafts
___ Newsletter production
___ Administrative, Filing
___ Fundraising
___ Volunteer coordination

SPECIAL SKILLS AND/OR QUALIFICATIONS

Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or other activities, including hobbies or sports.

PERSONAL INFORMATION

Age: _____ Have you ever been convicted of a crime? _____

If yes, explain _____

Is this for community service hours? _____

If yes, for what organization? _____

How many hours do you need to complete? _____

PREVIOUS VOLUNTEER EXPERIENCE

PERSONAL REFERENCES

Name _____ Phone _____

Relationship _____

Name _____ Phone _____

Relationship _____

EMERGENCY CONTACT INFORMATION

Name _____

Street Address _____

City St Zip _____ Phone _____

Email Address _____

AGREEMENT

By submitting this application, I affirm that the facts set forth are true and complete. I understand that if I become a volunteer, any false statements or omissions may result in my dismissal.

Name (printed) _____

Signature _____

Date _____

Please submit completed application to:

YWCA Mount Desert Island or email to: jackie@ywcamdi.org
36 Mount Desert St.
Bar Harbor, ME 04609