

Volunteer Application

DQ# _____



How did you hear of FOOD Share: Friend ___ Radio ___ Newspaper ___
 Website ___ Other _____

Volunteer Information		PLEASE PRINT	
Name (First, Last)			
Mailing Address			
City, State, ZIP Code			
<input type="checkbox"/> Male <input type="checkbox"/> Female	Spouse Name:		
Home Phone	()	Work Phone	()
Cell Phone	()	Fax	()
E-Mail Address			
Birthday (<i>Year is Optional</i>)			
Employer Information			
Retired?	Yes	No	
Company Name			
Occupation/Title			
Work Phone	()	Can we call you at work?	Yes No
Does your company have a matching gift program?	Yes No	Who does FOOD Share contact?	

What name would you like on your identification badge? _____

Volunteer Opportunities

In which areas you are interested in volunteering? *Check all that apply*

- _____ **Order Filler** Pack food items for delivery to locations county wide.
- _____ **Rescued Food Sorter** Sort and box food (produce, canned and packaged) for distribution.
- _____ **Check Out Clerk** Assist agencies in filling, weighing, and processing their orders.
- _____ **Truck Driver** Drive designated routes for food pick-up or deliveries.
Class 'C' driver's license and satisfactory DMV driving report required
- _____ **Driver's Assistant** Assist truck driver with loading and unloading of deliveries.
- _____ **Gleaner** Work directly in the fields to pick produce for distribution.
Must be at least 18 years old.
- _____ **Receptionist** Greet visitors receive and direct telephone calls, perform general clerical.
- _____ **Clerical** Provide administrative support to specific programs, data entry.
Computer experience or willingness to learn preferred.
- _____ **Forklift Driver** Move pallets of food within the warehouses and assist in loading and unloading trucks. (*Must be 18 years old. Forklift training required/ provided.*)
- _____ **Event Worker** Assist in planning, coordination and/or implementation of fundraising activities, information booths at community events, parades etc.
- _____ **Brown Bag Vol.** Assist in filling Brown Bag orders at any one of 30 sites in the county.

Some positions may require repetitive lifting and/or bending. Ask the Volunteer Coordinator for an appropriate placement if you have physical or medical conditions limiting your ability to lift or bend.

Special Skills or Qualifications

Check all that apply

- | | | | |
|--------------------------------------|------------------------------------------|--------------------------------------|------------------------------------------------------|
| <input type="checkbox"/> Contractor | <input type="checkbox"/> Doctor | <input type="checkbox"/> Writer | <input type="checkbox"/> Accounting |
| <input type="checkbox"/> Electrician | <input type="checkbox"/> Nurse | <input type="checkbox"/> Artist | <input type="checkbox"/> Clerical |
| <input type="checkbox"/> Plumber | <input type="checkbox"/> Student | <input type="checkbox"/> Minister | <input type="checkbox"/> Other (<i>List below</i>) |
| <input type="checkbox"/> Cook | <input type="checkbox"/> Sales | <input type="checkbox"/> Engineer | _____ |
| <input type="checkbox"/> Coach | <input type="checkbox"/> Public Speaking | <input type="checkbox"/> Agriculture | _____ |
| <input type="checkbox"/> Teacher | <input type="checkbox"/> Fund Raising | <input type="checkbox"/> Management | _____ |

Volunteer Experience

Summarize your experience as a volunteer with other organizations. PLEASE PRINT

ORGANIZATION	DUTIES

Person to Notify in Case of Emergency (*List two people*)

Name	1.)	2.)
Relationship		
Home Phone	()	()
Work Phone	()	()
Cell Phone	()	()

Agreement and Signature

- * I certify that the information provided is true and complete.
- * I understand that volunteers are unpaid.
- * I have received a copy of and understand that I am expected to abide by the policies, rules guidelines and procedures discussed in the volunteer manual.
- * I give my permission to FOOD Share, Inc to use any photo, video or likeness of me for FOOD Share promotional products and services. I will receive no compensation for use of my likeness.

I agree to all of the above _____
Signature
Date

THANK YOU FOR YOUR INTEREST IN VOLUNTEERING WITH FOOD SHARE!

Questions? Call the Volunteer Coordinator at 805-983-7100 ext.105

Office Use

Interviewed _____ *Recv'd Handbook* _____ *Job Description* _____
Assignment _____ *Supervisor Name* _____
2 wk follow-up _____ *Comments* _____
30 dy follow-up _____ *Comments* _____
 RSVP Info. _____ *Volunteer Dues \$15.00/year (not mandatory)* _____