VOLUNTEER APPLICATION FORM

Name: __________________________ Phone # ______________________

Email: ______________________________________________________

What type of volunteering are you most interest in doing (i.e. hamper/shelving team, awareness team, food drives, etc)?

________________________________________________________________________

Why do you want to volunteer?

________________________________________________________________________

How often are you able to volunteer? Circle below

As often as needed     Once a week     Once a month     Other__________

How many hours per week or month are you able to commit to? _________

All volunteers are required to attend a volunteer orientation, even if you have volunteered before. Orientations can be in a group setting or one on one. Please indicate below which days and times would work best for you.

Please fill out which days and times you are able to volunteer. Just a reminder that you will only be scheduled the number of hours you indicate above. Please attach your class schedule if you are able.

<table>
<thead>
<tr>
<th>Time available</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
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What is the best way to communicate info to you? (i.e. email, Facebook messenger, etc)

________________________________________________________________________

Please email your volunteer application to pantry.foodbank@suo.ca