

Revised 2/29/2012

**Position Applied for:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Volunteer Name:** \_\_\_\_\_ **Birth date Month/Day** \_\_\_\_/\_\_\_\_

**Phone:** (\_\_\_\_) \_\_\_\_\_ **Cell:** (\_\_\_\_) \_\_\_\_\_

**Physical Address:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**City:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

***Circle Highest Level of Education Attained:***

G.E.D., High School Diploma, Bachelor Degree, Graduate Degree

Major Field of Study \_\_\_\_\_

***Recent Work Experience:***

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**Help the Needy is a non-profit all volunteer organization with many opportunities available for you. We are always seeking highly qualified applicants, and those who just wish to contribute to the community, to join our organization. We know your time is valuable, so we have volunteer opportunities that are designed to fill as much, or as little time that you may have to offer. Please look through the volunteer position descriptions and feel free to discuss the opportunities with our office staff to see how your talents and desires will match up with our needs.**

Please write a short description of the specific tasks you would like to contribute to HtN. Please be concise and specific.

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***Please rate your current skill ability by writing in the appropriate rating***

**(E) Excellent (G) Good (F) Fair (P) Poor (N) None**

PHONE SKILLS		APPOINTMENT SETTING		RECORDS MANAGEMENT		FILING		ORGANIZATION SKILLS	
COMPUTER SKILLS		DATA ENTRY		DATA BASE ENTRY		DATA BASE MANAGEMENT		MICROSOFT OFFICE	
QUICK BOOKS		FINANCIAL TRACKING		BANKING CHECKBOOK		ACCOUNTING		BOOKKEEPING	
INTERVIEWING INTAKE		RECEPTION		CLIENT ASSISTANCE		ADMINISTRATIVE MANAGEMENT		EXECUTIVE MANAGEMENT	

Other Skills:

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***Please provide two references we can contact***

<b><i>Name</i></b>	<b><i>Phone number</i></b>

**For HtN use only:**

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References contacted Dates: \_\_\_\_\_

By: \_\_\_\_\_

Results: \_\_\_\_\_

Introductory Training Dates: \_\_\_\_\_

Date Training Completed: \_\_\_\_\_

Training Program: \_\_\_\_\_ Trainer: \_\_\_\_\_

**Reception** Training Dates: \_\_\_\_\_

Date Training Completed: \_\_\_\_\_

Trainer: \_\_\_\_\_

Date Started: \_\_\_\_\_

**Intake** Training Dates: \_\_\_\_\_

Date Training Completed: \_\_\_\_\_

Trainer: \_\_\_\_\_

Date Started: \_\_\_\_\_

**Other** Training

Training for What Position: \_\_\_\_\_

Date Training Completed: \_\_\_\_\_

Trainer: \_\_\_\_\_

Date Started: \_\_\_\_\_