

Putnam Christian Outreach Volunteer Application



Contact Information

| | |
|--|--|
| Name | |
| Street Address | |
| City ST ZIP Code | |
| Home Phone | |
| Work Phone | |
| E-Mail Address <i>**If you do not have an email address, we will provide one for you so you may obtain your volunteer schedule and clock in/out on your volunteer days.</i> | |

Availability

During which hours are you available for volunteer assignments?

- Weekday mornings Weekend mornings
 Weekday afternoons Weekend afternoons

Interests

Tell us in which areas you are interested in volunteering

- Administration
 Sales Events
 Social Media
 Fundraising
 Donations
 Sales Floor
 Our Community Blog
 Volunteer Coordination

Special Skills or Qualifications

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

| |
|--|
| |
|--|

Previous Volunteer Experience

Summarize your previous volunteer experience and tell us briefly why you would like to volunteer at PCO.

| |
|--|
| |
|--|

Person to Notify in Case of Emergency

| | |
|------------------|--|
| Name | |
| Street Address | |
| City ST ZIP Code | |
| Home Phone | |
| Work Phone | |
| E-Mail Address | |

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

| | |
|----------------|--|
| Name (printed) | |
| Signature | |
| Date | |

Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

Thank you for completing this application form and for your interest in volunteering with us.

God Bless,
The PCO Staff & Board