



PARTNERS in HOPE

Noel House Programs • Rose of Lima House

Partners in Hope Volunteer Application

Please complete, sign, and mail the application and Washington State Patrol Form to:

Partners in Hope
Attention: Volunteer Coordinator
120 Bell Street #103
Seattle, WA 98121

New Volunteer Orientation is held on the 2nd Saturday of every month. Paperwork must be received one week prior to the orientation. Applicants whose paperwork is received after the deadline will be scheduled for orientation the following month.

All volunteers must be willing to make at least a 3-month commitment.

Name: _____ Date: _____
Address: _____ Date of Birth: _____
City: _____ State: _____ Zip: _____
Phone: _____
(Day/Cell): _____ (Evening): _____
E-mail: _____
Emergency Contact (Name/Phone): _____

How did you learn about volunteer opportunities with Noel House/Rose of Lima House?

- | | |
|--|--|
| <input type="checkbox"/> SERVICE LEARNING
School Name: _____ | <input type="checkbox"/> CORPORATE VOLUNTEERISM
Company Name: _____ |
| <input type="checkbox"/> COMMUNITY FRIEND
Friend's Name _____ | <input type="checkbox"/> RELIGIOUS ORGANIZATION
Place of worship: _____ |
| <input type="checkbox"/> INTERNET | <input type="checkbox"/> OTHER: _____ |

What about Rose of Lima House/Noel House Programs interests you?

Why are people homeless?

PLEASE CHECK OFF THE DAYS AND TIMES YOU ARE AVAILABLE:

Please check all that apply	MON.	TUES.	WED.	THURS.	FRI.	SAT.	SUN.
10 A.M. - 1 P.M.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2 P.M.- 5 P.M.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5:45 P.M. - 7:45 P.M.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I WOULD LIKE TO VOLUNTEER...

Three-month commitment minimum required

- ONCE A WEEK
- ONCE A MONTH
- MORE THAN ONCE A MONTH (PLEASE INDICATE HOW OFTEN): _____

I WOULD LIKE MY SERVICE TO INCLUDE...(complete volunteer descriptions attached)

Please check all opportunities that interest you.

- DINNER SUPPORT Any preference where?: _____
- ADMIN SUPPORT (Daytime only)
- FUND DEVELOPMENT SUPPORT (Onsite and offsite)
- GRAPHICS AND WEB DESIGN
- MATERIAL DONATIONS DEVELOPMENT SUPPORT (Onsite and offsite)
- FACILITIES COORDINATION SUPPORT
- BLANKET DELIVERY TO SHELTERS (Once a week--must have own vehicle)
- MOVING ASSISTANCE (Must have own vehicle)
- FOOD DONOR AND DELIVERY (Must have own vehicle)
- FOOD BANK PICKUP AT NORTHWEST HARVEST (Must have own vehicle)

- FOOD BANK PICKUP AT FOOD LIFELINE (Must have own vehicle)
- WELLNESS VOLUNTEER/LIFE SKILLS CLASS FACILITATOR/ACTIVITY COORDINATOR
- MAILING PARTIES
- SEASONAL CLEANING PARTIES (Individuals or groups)
- SPECIAL EVENTS SUPPORT
- HOLIDAY INTERN (November 1st through January 3rd)

SERVICE-LEARNING VOLUNTEERS ONLY:

Name of course: _____

Name of Professor: _____

Hours in service-learning contract: _____

By signing this form, I acknowledge the commitment expected of me by Partners in Hope and promise to uphold the PiH mission of fostering a community of dignity and respect.

Signature: _____

Date: _____