



# MEALS ON WHEELS of TAKOMA PARK/SILVER SPRING

## VOLUNTEER APPLICATION

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Apt. No. \_\_\_\_\_

City/Zip: \_\_\_\_\_

Primary Phone: \_\_\_\_\_  Cell  Home

Alternate Phone: \_\_\_\_\_  Cell  Home

Email: \_\_\_\_\_ Birthday: \_\_\_\_/\_\_\_\_/\_\_\_\_

Employer or Agency: \_\_\_\_\_

Emergency contact : Name: \_\_\_\_\_

Phone: \_\_\_\_\_  Cell  Home Relationship: \_\_\_\_\_

Address/Notes: \_\_\_\_\_

Languages(s) other than English: \_\_\_\_\_

Gender:  Man  Woman  Non-binary Pref'd pronouns: \_\_\_\_\_

How did you hear about us? \_\_\_\_\_

What volunteer work have you done? \_\_\_\_\_

Why do you want to volunteer with us? \_\_\_\_\_

Which of these are you interested in doing? (Check all that apply)

- Driver (Noon-2pm)  Runner (Noon-2pm)
- Morning Kitchen Assistant (9:00am–Noon)  Midday Kitchen Assistant (12:15-2:15pm)
- Office (Admin or Building/Handy Projects)  Tabling or Events

Specify skills: \_\_\_\_\_

<b>INTERNAL USE ONLY</b>	<b>TO BE COMPLETED BY STAFF</b>
Form completed:	Scheduler:
Approved by:	ZM:
Start date	Aplos: