



1823 Buford Court ♦ Tallahassee, Florida 32308
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ABILITY 1ST VOLUNTEER SERVICES APPLICATION

APPLICANT INFORMATION:

NAME: _____
 LAST FIRST MIDDLE

ADDRESS: _____

CITY: _____ COUNTY _____ STATE _____ ZIP _____

HOME PHONE: _____ WORK PHONE: _____ EMAIL: _____

EMERGENCY CONTACT: _____ PHONE: _____

IF KNOWN, PLEASE LIST THE VOLUNTEER POSITION FOR WHICH YOU ARE APPLYING:

IF NOT KNOWN IS THERE A PARTICULAR TYPE OF VOLUNTEER WORK IN WHICH YOU ARE INTERESTED? (PLEASE CHECK ALL THAT APPLY BELOW)

- ASSISTING WITH BUILDING RAMPS
- ASSISTING WITH SPECIAL EVENTS/FUNDRAISING
- WORKING ONE-ON-ONE WITH A SINGLE CONSUMER
- WORKING DIRECTLY WITH A STAFF MEMBER
- HELPING IN OUR OFFICE WITH CLERICAL DUTIES
- ASSISTING WITH GROUP ACTIVITIES
- DOING FUNDRAISING, PUBLIC SPEAKING, ETC.
- NO PREFERENCE AT THIS TIME
- OTHER _____

AT WHAT TIMES ARE YOU VOLUNTEERING?

- I AM FLEXIBLE PREFER WEEKENDS PREFER EVENINGS
- PREFER DAYS PREFER WEEKENDS OTHER

LIST TIMES AVAILABLE _____

VOLUNTEER SIGNATURE

DATE

VOLUNTEER COORDINATOR