



Volunteer Application

413 West 46th Street, New York, NY 10036
PHONE 212.246.9885
FAX 212.246.9855
www.hartleyhouse.org

Contact Information

Full Name: _____ DOB: _____

Mailing Address: _____

Phone: _____ (Cell Preferred) E-mail: _____

Primary Language: _____ Secondary Language: _____

Emergency Contact Information

Full Name: _____ Relationship: _____

Primary Phone: _____ (Cell Preferred) E-mail: _____

Availability

How long (term) will you be able to volunteer your time: _____

During which days and hours are you available for volunteer assignments?

- Mornings Afternoons Evenings
 Mondays Tuesdays Wednesdays Thursdays Fridays Weekends

Interests

Tell us in which areas you are interested in volunteering (check all that apply)

- Working with Adults/Seniors Working with Children (*please attach updated resume, physical, fingerprinting & SCR forms*)
 Administrative/Secretarial Events Fundraising
 Marketing/Advertising Facilities & Maintenance Education/Tutoring
 Creative Arts Sports Other (please specify): _____

Why did you choose to volunteer with Hartley House?

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

Organization Name: _____ Dates of Volunteerism: _____

Summary of roles and responsibilities: _____

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Employment History & References

I am currently: A Full-Time Student School Name: _____

Working Part-Time Working Full Time Company Name: _____

Unemployed (please describe reason): _____

Please provide three (3) references below. (Please do NOT list family members.)

Name: _____ Relationship: _____

Email: _____ Primary Phone: _____

Name: _____ Relationship: _____

Email: _____ Primary Phone: _____

Name: _____ Relationship: _____

Email: _____ Primary Phone: _____

Agreement & 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.

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.