



VOLUNTEER PROFILE

NAME _____

COMPANY OR ORGANIZATION NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ ALTERNATE PHONE _____

EMAIL ADDRESS _____

I PREFER TO HELP WITH: OFFICE WORK GARDEN WORK

I AM AVAILABLE TO HELP: *(Common shifts are 10am-2pm for office and 8-11am for garden. Office hours are 9am-5pm)*

MONDAY _____

TUESDAY _____

WEDNESDAY _____

THURSDAY _____

FRIDAY _____

I WOULD LIKE TO WORK: AS NEEDED WEEKLY BI-WEEKLY MONTHLY

MAY WE CALL/EMAIL YOU FOR LAST MINUTE NEEDS? _____

DO YOU HAVE PREVIOUS VOLUNTEER EXPERIENCE? _____

IF SO, WHERE AND WHAT DID YOU DO? _____

DO YOU HAVE EXPERIENCE WITH ANY OF THE FOLLOWING? CHECK ALL THAT APPLY.

- | | | |
|--|--|--|
| <input type="checkbox"/> MICROSOFT WORD | <input type="checkbox"/> GUIDING TOURS | <input type="checkbox"/> WEEDING |
| <input type="checkbox"/> MICROSOFT EXCEL | <input type="checkbox"/> RETAIL SALES | <input type="checkbox"/> GENERAL GARDENING |
| <input type="checkbox"/> ADOBE PHOTOSHOP | <input type="checkbox"/> EVENT SET UP | <input type="checkbox"/> PLANT PROPAGATION |
| <input type="checkbox"/> MULTI-LINE PHONE SYSTEM | <input type="checkbox"/> MARKETING | <input type="checkbox"/> PLANTING |
| <input type="checkbox"/> GRANT WRITING | <input type="checkbox"/> OTHER : _____ | |