

Volunteer Application Form

Thank you for your interest in volunteering with North End Community Improvement Collaborative, Inc. Please complete the following application form to help us learn more about you and your interests. Your contribution as a volunteer is highly valued and greatly appreciated.

				Applicant	Information			
Name:							Da	te:
	Last			First		М.	Ι.	
Address:								
	Street	Address						Apartment/Unit #
	City					State	,	ZIP Code
Phone				Email _				
Are you a	minor?	Yes 🗆 🛛	lo 🗆	Date of	Birth			
If so, Pare	nt/Gua	rdian Nam	e:					
Parent/Guardian Signature:					Date			
			<i>.</i>		ncy Contact			
Please list	: a conta	ict in case	of an emer	gency.				
Name:					Relatio	onship:		
Phone:				F	mail			
- none				·				
				Ava	ilability			
I am avail	able to	volunteer	the followir	ng times:				
□ Morn	ing	Mon	Tues	Wed	Thurs	Fri	_ Sat	Sun
□ After	noon	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
Do you pr	efer a r	egular sch	edule, or w	ould you like	e to be notifie	d "as needec	! "?	



Volunteer Interests

Please indicate the areas where you are interested in volunteering (please check all that apply):

- □ Events: Planning, Coordination, Set Up/Tear Down
- □ Community Outreach and Engagement
- □ Administrative Support
- Urban Farm
- □ Farmers Market
- Other:

Skills and Experience

Please share any relevant skills, experience, or hobbies that you believe would contribute to your volunteer role:

Release and Signature

Notice of filming and photography: I give permission to use photos of myself for promotional and informational purposes for NECIC and affiliates. Yes \Box No \Box

I agree to receive texts for volunteer updates. Yes No	I agree to	receive tex	ts for volu	nteer upd	ates. Ye	s 🗆 N	lo 🗆
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I certif	that I have received a copy of the NECIC Volunteer Manual.	Yes 🗆	No 🗆
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By signing below, I acknowledge that I have provided accurate information in this application form. I understand that volunteering with NECIC, Inc. is a commitment, and I am willing to adhere to the organization's policies and guidelines.

Applicant Signature	Date _	
	. .	
Parent/Guardian Signature	Date _	

Thank you for your interest in volunteering with us! Please submit your completed application to Tionna Perdue at <u>tionna@necic-ohio.org</u> or return to our main office located at 134 N. Main Street. We will review your application and will contact you to discuss potential volunteer opportunities that align



with your interests and abilities. We look forward to welcoming you to our team of dedicated volunteers!