



Rose Gage
Coordinator of Volunteer Services
10 Hammond Street
Worcester, MA 01610
rgage@ccworc.org; 508-860-2211

VOLUNTEER APPLICATION

Thank you for your interest in volunteering. We appreciate you taking a few minutes to complete this application to best match your needs with our opportunities. In addition to this application, all volunteers, who are 18 years of age and older are required to complete the attached Criminal Offender Record Information (CORI) form and have no criminal history.

Name: _____

Address: _____

Home Number: _____ Cell Number: _____

Email: _____ Date of birth (volunteers must be at least 16 years old) _____

Are you a: High School Student _____ College student _____

What languages do you speak? _____

Are you licensed to drive in MA? _____ Do you have a car available to you? _____

Name & phone number of a reference: _____

IN CASE OF AN EMERGENCY, CONTACT:

Name: _____ Relationship: _____

Home Number: _____ Cell Number: _____

AVAILABILITY:

Are you looking for an ongoing or occasional opportunity? _____

How many hours do you want to volunteer a week? _____

Please complete the chart below and include the times that you are available to volunteer.

Times	Monday	Tuesday	Wednesday	Thursday	Friday
Morning					
Afternoon					
Where do you want to volunteer?	Leominster	Mercy Centre (Worcester)	Southbridge	Whitinsville	Worcester

Please describe why you are interested in volunteering with Catholic Charities? _____

What areas are you interested in volunteering in (please check all that apply)?

- Citizenship classes Clothing closet Drug and Alcohol addiction (Crozier House – Worcester) Education (i.e. financial literacy) Food pantry
- Individuals with developmental disabilities Literacy classes
- Monthly food bank runs to Worcester County Food Bank Receptionist / data entry
- Refugee resettlement (help individuals find resources in the community)
- Seasonal volunteer (help with holiday food and toy drives)
- Shelter for families experiencing homelessness (Youville House – Worcester)
- Translators Other _____

Is it required that you volunteer (i.e. for a Service-Learning course; for high school; DTA; the courts, etc.)? If so, please explain the requirement. _____

How did you hear about Catholic Charities and the volunteer opportunities? _____

Please list your skills, specialties and hobbies you would want to share with others.

Please list any previous work or volunteer experiences that connect with the opportunity you're interested in? _____

Signature _____ **Date:** _____

Office Use Only	Today's date: _____
Notes: _____	

CORI Form Completed <input type="checkbox"/> Y <input type="checkbox"/> N	