



STRENGTHENING FAMILIES,
SUSTAINING COMMUNITIES

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Volunteer Application

We are proud and happy to have you volunteer your time to help the Nurturing Center meet its goals. By volunteering you help us to help more people with the resources we have. Thank you for using your time in this unselfish way.

Contact Information

| | |
|------------------|--|
| Name | |
| Address | |
| City, State, Zip | |
| Home Phone | |
| Work Phone | |
| Cell Phone | |
| Email Address | |

Availability

How far in advance do you need to be notified? _____

During which hours are you available for volunteer assignments?

_____ Weekday mornings

_____ Weekend mornings

_____ Weekday afternoons

_____ Weekend afternoons

_____ Weekday evenings

_____ Weekend evenings



Interests

Tell us in which areas you are interested in volunteering

| | | | |
|--------------------------|---|--------------------------|---|
| <input type="checkbox"/> | Clerical – making packets; labeling mail; | <input type="checkbox"/> | Making phone calls |
| <input type="checkbox"/> | Reception desk—answering phones/greeting walk-ins | <input type="checkbox"/> | Mentoring young women in our GEM (Girls empowered by Mentoring) program (16 month commitment) |
| <input type="checkbox"/> | Fundraising activities: | <input type="checkbox"/> | Yard/building projects |
| <input type="checkbox"/> | <input type="checkbox"/> Committee Work | <input type="checkbox"/> | Library Maintenance |
| <input type="checkbox"/> | <input type="checkbox"/> Hauling/setting up for fundraisers | <input type="checkbox"/> | Computer data entry |
| <input type="checkbox"/> | <input type="checkbox"/> Staffing tables for fundraisers | <input type="checkbox"/> | Play with children (during classes or support groups) |
| <input type="checkbox"/> | Create Nurture Baskets | <input type="checkbox"/> | |
| <input type="checkbox"/> | Decorating for Holidays | <input type="checkbox"/> | |
| <input type="checkbox"/> | Family Activity Night Coordinator | <input type="checkbox"/> | |
| <input type="checkbox"/> | Evening ParentShare Group Coordinator | <input type="checkbox"/> | |

Special Skills or Qualifications

Summarize any special skills and/or qualifications you have acquired from employment, previous volunteer work or through other activities, including hobbies or sports:

Would you be willing to attend a volunteer orientation? Yes No

If so, what day and time would work best for you? _____

Would you be willing to have a background check performed? Yes No

Personal References

Please list 2 people we can contact:

Name: _____ Phone #: _____

Name: _____ Phone #: _____

Agreement and 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. I understand that a background check will be conducted if deemed necessary by The Nurturing Center, in instances that include children.

| | |
|----------------|--|
| Name (printed) | |
| Signature | |
| Date | |