

What are interested in doing as a volunteer? (Please check all that apply.)

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| <input type="checkbox"/> One-to-one friendship | <input type="checkbox"/> Friendly visitor (at NWW home) |
| <input type="checkbox"/> Wednesday Night Drop-In Program | <input type="checkbox"/> Skill-building (literacy, computer, etc.) |
| <input type="checkbox"/> Special projects | <input type="checkbox"/> Internship |
| <input type="checkbox"/> Family volunteering (with spouse or children) | <input type="checkbox"/> Other (Please specify: _____) |

How often would you be able to volunteer?

- A regular weekly schedule (Please specify # of hours: _____)
- Twice monthly
- Once monthly
- Other (Please specify: _____)

How did you find out about our volunteer program?

Have you ever been in an automobile accident in which you were found to be at fault?

If so, please give the approximate date and circumstances:

As part of the application process, please give the names of two references, not including relatives:

Name	Relationship
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Telephone	E-mail Address
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Name	Relationship
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Telephone	E-mail Address
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I authorize the NWW Committee to contact the above individuals for a character reference, and I attest that my personal information is accurate and correct.

Signature of Volunteer Applicant

Date