

Board of Selectman Office 6 Village Green Pelham, New Hampshire 03076

## **APPLICATION FOR VOLUNTEER POSITION**

## At the Council of Aging and/ or Hobbs Community Center

PLEASE PRINT (EXCEPT WHERE SIGNATURE IS REQUESTED)

Board/ Position Being Sought:		
Date Submitted:		
Name:	Phone:	
Address:		
Education:		
Email Address:		
What experience would you bring to this p	oosition?	
Why are you seeking this appointment? (for board positions only)		
Do you have any specific goals or objectives you would seek to implement if you are appointed to this position? (for board positions only)		
SIGNED:	DATE:	

## PELHAM SENIOR PROGRAMS VOLUNTEER REGISTRATION

## **VOLUNTEER INTEREST (CHECK ALL THAT APPLY)**

- KITCHEN (WORKING IN THE HOBBS KITCHEN, SERVING FOOD & REFRESHMENTS)
- o THIFT STORE
- o PROGRAM ASSISTANT/ LEADER (TEACHING)
- EVENTS (SHOPPING FOR EVENT, SERVING FOOD, ASSISTING IN HOLDING EVENTS, PREPARING FOOD)
- SERVING ON THE COA BOARD OF DIRECTORS
- o NEWSLETTER (BULK MAILING)
- o BINGO
- o FEEDING AMERICA (BREAD PICK-UP)
- RECEPTIONIST (GENERAL OFFICE WORK & REGISTRATION)

What skills do you have that will contribute to your volunteer experience? (check all that apply)

- ORGANIZATION MANAGEMENT
- o PUBLIC SPEAKING
- o ADMINISTRATIVE/ CLERICAL SKILLS
- o TEACHING
- O COMMUNICATION SKILLS
- o ARTS & CRAFTS
- CONSTRUCTION, CARPENTRY & OTHER BUILDING SKILLS
- O CUSTOMER SERVICE
- **O HUMAN RESOURCES SKILLS**
- WRITING/PROPOSAL WRITING SKILLS
- BOOKKEEPING/BUDGETING SKILLS
- IT SKILLS (COMPUTER KNOWLEDGE, WEBSITE MANAGEMENT, ETC)

o KNOWLEDGEABLE IN:	
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How did you find out about volunteer opportunities at the Council on Aging and/or Hobbs Community Center?

Why are you interested in volunteering? For use by Volunteer Coordinator: 1. Each volunteer is required to review the Pelham NH Council on Aging & Hobbs Community Center volunteer policies and sign the statement below. In signing this form, I am agreeing that I have received, read and agree to abide by the Pelham NH Council on Aging & Hobbs Community Center Volunteer Policies & procedures. **Signature Date** 2. Resignation/Termination of the Volunteer: Date Resigned/Terminated: \_\_\_\_\_ Reason for Resignation/Termination:

Signature of Volunteer Coordinator: \_\_\_\_\_\_\_Date: \_\_\_\_\_\_