



Women of Worth is a 501(c)(3) organization working in the Nevada County area providing services women escaping domestic violence and human trafficking. Please fill out this form and return to Women of Worth to receive consideration for a volunteer position. You may mail this form to our mailing address P.O. Box 213, Cedar Ridge Ca, 95924 or attach it to an email to cinnamon@womenofworth.org. After we receive your application, we will contact you and arrange for an interview. All information on this form will be kept confidential and will help us find the perfect volunteer project for you. Please be advised that, since we work with a vulnerable population, we require a criminal background check.

Volunteer Application Form

First Name: _____

Last Name: _____

Street Address:

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Email: _____

Employer (if applicable) _____

Date of Birth: _____

Do you have skills, special interests or experience that you would like us to consider when placing you into an appropriate position?

Here are some of the volunteer positions we offer. Please check the ones you would be most interested in.

Office help (routine office tasks on a specific day of the week).

Events (fundraising events, client get togethers, celebratory events).

Fundraising (may involve telephone calls, writing thank you notes, or grant writing).

Communications (writing copy for publications and fundraising messages. Social media experience appreciated).

Direct work with clients (mentoring, providing support, other professional service)

What days are you usually available? Mon: Tues: Wed: Thurs: Fri: Sat:

How many hours are you available per week? Do you prefer Morning? Afternoon?

Please describe any physical limitations:

Emergency contact:

Name: Phone: Relationship:

Please provide the names and contact information of two character references.

Name:

Telephone:

Relationship:

Name:

Telephone:

Relationship:

Liability Release:

As a volunteer of Women of Worth I agree to abide by all policies and procedures as spelled out in the volunteer handbook. I understand that I volunteer at my own risk and neither the organization nor its employees assume any liability for any accidental injury or health problem arising from volunteer work I perform for the organization. I agree that all work I do is on a volunteer basis and I am not eligible to receive any monetary payment or reward.

Signature:

Date: