

“Gang of Hope” Volunteer/Mentor Profile

Name: _____

Address: _____

Home phone: _____ Best time to call: _____

Bus. phone: _____ Best time to call: _____

Occupation: _____ Date of birth: _____

Employer / School: _____

1. How many hours per week can you contribute to the program ? _____

Please circle days available: M T W TH F SA SU

Commitment for this year: _____

2. Please indicate any previous work experience in other volunteer organizations.

3. Briefly describe why you offered to volunteer in this organization (e.g., community involvement, further experience in the field, concern for this cause, etc.)

4. Do you have a specific achievement goal that you plan to accomplish through this volunteer experience ?

5. Briefly describe how you would like to participate? _____

6. Which one if these areas are you interested in ?

- | | |
|---|---|
| <input type="checkbox"/> Visiting School | <input type="checkbox"/> Mentor for a day at work |
| <input type="checkbox"/> Taped Interview | <input type="checkbox"/> Production Help |
| <input type="checkbox"/> Newsletter Committee | <input type="checkbox"/> Fundraising |
| <input type="checkbox"/> Advertising | <input type="checkbox"/> Develop Resources |
| <input type="checkbox"/> Other specific areas _____ | |