

VOLUNTEER INTAKE FORM

Please complete **all** sections and return this form to our office. Thank you.



Name: _____ Date of Birth: _____

Address: _____ City: _____ Zip: _____

Telephone: (____)____-____ Cell: (____)____-____ Email: _____

Current and former occupation(s): _____ Veteran? ___ Yes ___ No

Highest level of education: _____ Schools: _____

What are your skills and interests? _____

Which language(s) do you speak? English Only: _____ Other: _____

Current volunteer work: _____

Kind of volunteer assignment desired: _____

Would you like to be notified about one-time, short-term volunteer opportunities? ___ Yes ___ No

How did you hear about us? _____

Fashion Sixty4 values its volunteers and we will endeavor to provide you with a written position description so that you can understand your role; full induction, orientation and any training necessary for the volunteer role; a safe and healthy environment in which to perform your role. Please provide the following:

Driver's License Number: _____ Expiration date: _____

Name of Emergency contact: _____

Address: _____ City: _____ State: _____

Zip: _____ Telephone: (____) _____ Relationship to you: _____

All Volunteers at Fashion Sixty4 agree to transfer all intellectual property rights and interests (including copyright) in any ideas or materials they created relating to their provision of voluntary services at Black Tie For A Cause to Fashion Sixty4. Volunteers consent to the use by Fashion Sixty4 of such creations in a manner reasonably contemplated by the voluntary services provided under this contract. As a volunteer, you also consent not to bring any claim for infringement of your moral rights in respect of that use. I volunteer my service for the Black Tie For A Cause event and attest that I am not an employee of Fashion Sixty4.

Volunteer Signature: _____ Date: _____

Director: _____ Date: _____

For office use only:

PLACEMENT 1: _____

POSITION SUPERVISOR: _____

ASSIGNMENT: _____

STARTING DATE: _____

COMPLETED DATE: _____

DATE AND INITIALS: _____

PLACEMENT 2: _____

POSITION SUPERVISOR: _____

ASSIGNMENT: _____

STARTING DATE: _____

COMPLETED DATE: _____

DATE AND INITIALS: _____

PLACEMENT 3: _____

POSITION SUPERVISOR: _____

ASSIGNMENT: _____

STARTING DATE: _____

COMPLETED DATE: _____

DATE AND INITIALS: _____

NOTES
