



Date: \_\_\_\_\_

## VOLUNTEER APPLICATION

### CONTACT INFORMATION

Name:	
Address:	
Phone (h):	Phone (cell):
Email:	

### AREAS OF INTEREST

Rank your top three areas of interest. Please note that volunteer opportunities vary throughout the year and may not always be available within the areas you select.

- After-School Programs
- Taste Tastes/Cooking
- In-Class Workshops
- Fundraising
- Other \_\_\_\_\_
- Special Events
- Summer Camps
- Office Support
- Advisory Board Member
- Marketing/Outreach
- Summer Programs
- Research Projects
- Committee Member

Please describe why you are interested in volunteering at GMFTS:

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### AVAILABILITY

Some of our volunteer opportunities require weekly hours and scheduled, regular attendance. Others may only require monthly participation or less time per week. Therefore, it helps us to know your availability when finding a program that fits your needs.

Are you interested in volunteering (please check all that apply):

\_\_\_\_\_ Weekly      \_\_\_\_\_ Monthly      \_\_\_\_\_ As needed through the year



**AVAILABILITY**

Please specify the day(s) and time(s) that are best for you. Please note that opportunities for volunteering on weekends may be limited.

SUN	MON	TUES	WED	THU	FRI	SUN

What date are you available to begin volunteering: \_\_\_\_\_

Do you have a car you can use for volunteer work:      Yes      No

**EMPLOYMENT**

Employer	Dates of Employment	Position Held

**VOLUNTEER EXPERIENCE**

Organization	Dates of Service	Tasks/Responsibilities

**REFERENCE**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**EMERGENCY CONTACT**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

**Return this completed form to:**

Green Mountain Farm-to-School  
 194 Main Street, Suite 301  
 Newport, VT 05855  
 Fax: 802-334-5655  
 Email: [programs@gmfts.org](mailto:programs@gmfts.org)