



Somerville Homeless Coalition

Individual Volunteer Application

Name: _____

Address: _____

State: _____ Zip: _____

City: _____

Phone: _____

Date of birth: _____

Email Address: _____

I would like to be added to the SHC mailing list.

I would like to (check ALL that apply):

Coordinate a food/toiletry drive	Create care packages for new housing residents
Help at an SHC event. (Road Race, Golf, etc.)	Office/administrative help (as needed)
Cook/serve meals (limited)	Other

I have skills/experience in: (check ALL that apply):

Event planning	Legal services
Computers/Web design	Fluency in a foreign language (please list)
Office work	Construction/painting

Current availability for volunteering:

Sun.	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.

What is your current place of employment or school, if any? (optional):

Are you volunteering as part of a class or other program requirement?:

Do you have a felony conviction? If yes, please describe (some opportunities require a CORI):

Other comments:

Thank you for applying! Our Volunteer Coordinator will contact you in a timely manner.