

Volunteer Questionnaire

Section 1: Personal Information

1. **Full Name:**

2. **Email Address:**

3. **Phone Number:**

4. **Address:**

5. **Date of Birth:**

Section 2: Background Information

6. **If you are employed, what is your current occupation?**

7. **Please describe your educational background (include certifications, etc.):**

8. **Do you have prior volunteer experience?**

Yes **Experience with people in recovery?** Yes
 No

No

If yes, please describe your experience:

9. **What skills or expertise do you have that could help the organization? (e.g., leadership, event planning, technical skills)**

Section 3: Interests and Availability

10. What areas of our organization are you most interested in volunteering for?

(Select all that apply)

- Administrative Support
- Cleaning / Light Maintenance
- Community Outreach
- Education & Training
- Event Planning / Day-of Help
- Fundraising
- Groundskeeping
- IT / Data Management
- Marketing & Communications
- Mentoring
- Music
- Social Media
- Transportation
- Other (specify):

11. How many hours per week are you available to volunteer?

- 1-3 hours
- 4-6 hours
- 7-10 hours
- More than 10 hours

12. What days & times of the week are you available? (Select all that apply)

- Monday _____
- Tuesday _____
- Wednesday _____
- Thursday _____
- Friday _____
- Saturday _____
- Sunday _____

13. Are you open to volunteering for special events or projects that may require additional time commitment?

- Yes
- No

Section 4: Personal Motivation

14. What led you to want to help us? If you're willing to share, are you in recovery?

15. Do you have a passion to help people in need, especially those in recovery?

16. Do you have any specific goals or objectives for your volunteer work?

Section 5: Additional Information

17. Do you have any restrictions or accommodations – health, legal, religious, etc. - we need to be aware of?

- Yes
- No
- If yes, please specify:

18. How did you hear about our volunteer opportunities?

19. Is there anything else you would like us to know about you?

Consent and Agreement

20. Do you consent to having your information stored and used by our organization for volunteer coordination purposes?

- Yes
- No

21. If you join as a volunteer, would you agree to having a background check done?

- Yes
- No

