



VOLUNTEER APPLICATION

First Name	Last Name

Street Address

City	State	Zip code

What is the best way to reach you?	Phone

	Email

I am: working retired a student My birth date is: (M/D/YYYY)

Please list two people (other than relatives) who have known you for at least two years and that we may contact for references.

1. Name	Relationship	Phone	Email

Address

2. Name	Relationship	Phone	Email

Address:

Emergency Contact

Name	Relationship	Phone	Email

Tell us about any health concerns/limitations that we should be aware of

Check the Penn's Village volunteer opportunities that you might enjoy.

Working Directly with Members

- Drive a member to a health care appointment, grocery store, etc.
- Help a member with home organization such as straightening a closet, doing paperwork
- Visit and chat with someone and share interests/companionship
- Run errands
- Do light household chores
- Care for a pet
- Assist with technology: computers, smart phones, tablets, etc.
- Support members before, during and after a health care appointment

Working "Behind the Scenes" as part of a team

- Help with administration (member services scheduling, event registrations, requests for information)
- Provide graphics and design expertise
- Share information system and software expertise
- Perform accounting functions
- Plan an educational, cultural or social event
- Assist with fundraising
- Write for the newsletter or blog
- Work with social media, Facebook, Twitter, LinkedIn
- Welcome new members
- Recruit members and volunteers
- Coordinate a book club, film discussion, dining get-together, etc.
- Lead a language conversation group, e.g. French, Spanish

I understand that Penn's Village will check my references and/or run a background check as part of their screening process. To the best of my knowledge the above information is correct. I also understand that members for whom I volunteer will need to have my contact information. I agree to maintain strict confidentiality and respect the privacy of members and other volunteers within the Penn's Village community.

Signature of Applicant

Date

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Signature of Interviewer

Date

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Tell us about professional certifications, credentials, experience and special skills that you would like to share with Penn's Village

<input type="checkbox"/>	Writing	<input type="checkbox"/>	Communications & Marketing
<input type="checkbox"/>	Fundraising	<input type="checkbox"/>	Finance/Accounting
<input type="checkbox"/>	Graphics/Design	<input type="checkbox"/>	Social Media
<input type="checkbox"/>	Computer software	<input type="checkbox"/>	Event Planning
<input type="checkbox"/>	Other	<input type="checkbox"/>	Other
<input type="checkbox"/>	Other	<input type="checkbox"/>	Other

Additional Data (optional)

Race/Ethnicity:		What is your Living Situation:	
<input type="checkbox"/>	African American or Black	<input type="checkbox"/>	I live alone
<input type="checkbox"/>	Asian	<input type="checkbox"/>	I live with 1 other person
<input type="checkbox"/>	Caucasian or White	<input type="checkbox"/>	I live with 2 or more other people
<input type="checkbox"/>	Hispanic or Latino	Do you have difficulty:	
<input type="checkbox"/>	Pacific Islander	<input type="checkbox"/>	Hearing in a Group Setting
<input type="checkbox"/>	Other	<input type="checkbox"/>	Using Stairs
Do you consider yourself:		<input type="checkbox"/>	Walking Short Distances
<input type="checkbox"/>	Bisexual	<input type="checkbox"/>	Other
<input type="checkbox"/>	Gay or Lesbian	How Did You Hear About Us:	
<input type="checkbox"/>	Heterosexual	<input type="checkbox"/>	Family Member or Friend
<input type="checkbox"/>	Transgender	<input type="checkbox"/>	Penn's Village Program
<input type="checkbox"/>	Transsexual	<input type="checkbox"/>	Penn's Village Brochure
Do you consider yourself:		<input type="checkbox"/>	Hospital or Health Care Professional
<input type="checkbox"/>	Female (she/her)	<input type="checkbox"/>	Social Service Agency
<input type="checkbox"/>	Male (he/him)	<input type="checkbox"/>	Newspaper Article
<input type="checkbox"/>	Non-Binary (they/them)	<input type="checkbox"/>	Radio or Television Feature
Are you a Veteran?		Website:	
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
		Social Media:	

Email your application to info@pennsvillage.org or mail to Penn's Village, 201 South 21 Street, Philadelphia PA. 19103 Our telephone number is 215-925-7333.

Penn's Village welcomes and actively encourages an inclusive and diverse community of members, staff, Board of Directors and volunteers. Inclusiveness and diversity means welcoming all and excluding no one because of age, race, ethnicity, gender, sexual orientation, social-economic status, physical abilities, religious beliefs or political beliefs.