



# VOLUNTEER APPLICATION

Revised (8-25-2020)

*Coastal Neighbors Network is a membership-based organization committed to supporting older residents, on a one-to-one basis, who wish to stay safe, independent, and connected in their community.*

*Thank you for your interest in volunteering! In order to match your interests with the jobs to be done, please tell us a little more about yourself.*

## I. General Information

- A. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
Email \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Preferred notification method (please circle): phone cell email
- B. Emergency Contact \_\_\_\_\_ Relationship \_\_\_\_\_  
Phone \_\_\_\_\_ Email \_\_\_\_\_

## II. Volunteer Opportunities - How would you like to help? (mark your interests)

- |                                 |                                      |
|---------------------------------|--------------------------------------|
| A. In-Home Assistance           | B. Outdoor Assistance & Chores _____ |
| • Companionship visits _____    | C. Driving (and/or escorting) _____  |
| • Light household chores _____  | D. Office Assistance _____           |
| • Basic Technical Support _____ |                                      |

## III. Availability

Please indicate the days and times you are usually available to volunteer.

	Mon	Tue	Wed	Thu	Fri	Sat	Sun
Morning							
Afternoon							
Evening							
Flex/On call							

Because we are a relationship-based community, we hope you can commit for a year.

How frequently would you like to volunteer? Weekly, Bi-weekly, Monthly (please circle)

If you are a seasonal resident, please tell us approximate dates

when you are available. \_\_\_\_\_

**IV. Interests, Skills, Talents, Work/Life Experience - (especially with elderly).** Help us get to know you. You do not have to have any special skills to be a volunteer, but if you do, please let us know! (mark any that apply, and/or add others)

_____ Computer skills	_____ Decorating	_____ Using tools
_____ Office skills	_____ Arts & Crafts	_____ Musical instrument
_____ Writing	_____ Knitting/Sewing	_____ Lectures, concerts,
_____ Organizational skills	_____ Cooking	theatre

Other: \_\_\_\_\_

**V. Previous Volunteer Experience & References**

Please provide information on other organizations with which you have volunteered:

#1. Name of organization \_\_\_\_\_  
Dates \_\_\_\_\_  
Type of work you did \_\_\_\_\_  
Contact person \_\_\_\_\_  
Phone \_\_\_\_\_

#2. Name of organization \_\_\_\_\_  
Dates \_\_\_\_\_  
Type of work you did \_\_\_\_\_  
Contact person \_\_\_\_\_  
Phone \_\_\_\_\_

Please list 3 references who are not related to you, one of which is a professional contact. If you are applying to be a driver, list someone who has ridden in your car. Please let these references know that someone from Coastal Neighbors will be contacting them.

#1. Name \_\_\_\_\_  
Phone \_\_\_\_\_  
Email \_\_\_\_\_  
#2. Name \_\_\_\_\_  
Phone \_\_\_\_\_  
Email \_\_\_\_\_  
#3. Name \_\_\_\_\_  
Phone \_\_\_\_\_  
Email \_\_\_\_\_

***THANK YOU !!***



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### ***NEXT STEPS...***

You will be contacted for a personal interview.

If you are applying to be a volunteer driver, you will be asked for:

- Copy of driver's license
- Copy of insurance coverage page
- Registry of Motor Vehicles Check Agreement (CNN provides)

All volunteers will be asked to sign the following:

- Volunteer & Confidentiality Agreements
- Release of Liability Waiver
- CORI (Criminal Offender Record Information) Form

For more information, you may contact CNN at:

Coastal Neighbors Network, Attn. Andy Pollock  
P.O. Box 80073  
South Dartmouth, MA  
02748

Email: [volunteers@coastalneighborsnetwork.org](mailto:volunteers@coastalneighborsnetwork.org)

Website: <http://www.coastalneighborsnetwork.org>