

**Town of Glastonbury  
Senior Service Department  
300 Welles St  
Glastonbury, CT 06033  
860-652-7605**

**VOLUNTEER APPLICATION**

Date \_\_\_\_\_

Name (Please print)

\_\_\_\_\_

|       |        |      |
|-------|--------|------|
| First | Middle | Last |
|-------|--------|------|

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

Telephone: Day: \_\_\_\_\_ Evening: \_\_\_\_\_

Cell: \_\_\_\_\_

Email: \_\_\_\_\_ Preferred Method of contact: \_\_\_\_\_

In Emergency, please notify: \_\_\_\_\_

|      |           |
|------|-----------|
| Name | Telephone |
|------|-----------|

Why do you wish to volunteer?

Do you have any special skills or interests (computers, music, art, etc)?  
or any volunteer preferences (cooking, crafts, etc.)?

Languages spoken:

Do you have any limitations that would affect specific volunteer opportunities?

Are you interested in short-term or long-term volunteer work?

Are you available year-round?

Please note your availability:

|           |            |
|-----------|------------|
| Weekdays: | Morning:   |
|           | Afternoon: |
|           | Evening:   |

|           |           |
|-----------|-----------|
| Weekends: | Morning   |
|           | Afternoon |
|           | Evening   |

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**Employment or Previous volunteer experience**

Present or most recent Employment or volunteer position: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Past Employment or Volunteer position: \_\_\_\_\_

From: \_\_\_\_\_ To: \_\_\_\_\_

Reason for leaving: \_\_\_\_\_

Education: (Circle # of years of school completed)

Less 8 9 10 11 12 13 14 15 16 more

References: (Two persons other than relatives)

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| Name | Address | Telephone | Relationship |
|------|---------|-----------|--------------|
|------|---------|-----------|--------------|

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| Name | Address | Telephone | Relationship |
|------|---------|-----------|--------------|
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I understand that for certain volunteer opportunities, a police/background check, and/or a health check may be required.

If necessary, this will be indicated on the Volunteer Job opportunity sheet.

I give permission to the Human Services Department to contact the references I have listed above.

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Signature of applicant

Date signed

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