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<http://www.kauaifoodbank.org>

Volunteer Application

Please attach a copy of your driver's license or other photo ID to this application.

Yes, I want to volunteer my time at the Kauai Food Bank!

I would like to do work in the following areas:

- | | | |
|---|--|---|
| <input type="checkbox"/> Receptionist / Office Work | <input type="checkbox"/> Computers | <input type="checkbox"/> Accounting |
| <input type="checkbox"/> Typing / Filing | <input type="checkbox"/> Vehicle Maintenance | <input type="checkbox"/> Arts / Graphics |
| <input type="checkbox"/> Warehouse: Stocking
Shelves, Filling Orders | <input type="checkbox"/> Heavy Warehouse:
Unloading / Loading Pallets | <input type="checkbox"/> Building: Carpentry, Plumbing,
Painting |
| <input type="checkbox"/> Driver* | <input type="checkbox"/> Other: _____ | |

***Note:** You must have valid Hawaii driver's license, current auto insurance, and a clean driving record.

Availability

The Kauai Food Bank is open Monday – Friday, 8:00 a.m. to 4:00 p.m. During which hours are you available for volunteer assignments?

	Monday	Tuesday	Wednesday	Thursday	Friday
Available Hours:					

How did you hear about the Kauai Food Bank and our need for volunteers?

- | | |
|--|--|
| <input type="checkbox"/> Family / Friend | <input type="checkbox"/> Church / Agency |
| <input type="checkbox"/> Radio | <input type="checkbox"/> Newspaper |
| <input type="checkbox"/> Kauai Food Bank Website | <input type="checkbox"/> Other: _____ |

Contact Information

Full Name _____
 Street Address _____
 City, State, ZIP Code _____
 E-Mail Address _____
 Birth Date _____
 Phone (Home) _____ (Work) _____ (Cell) _____

Person to Notify in Case of Emergency

Full Name _____
 Relationship _____
 Phone #s: (Home) _____ (Work) _____ (Cell) _____

Agency Credit

Do you want an agency or church credited for your volunteer hours?

YES

NO

If yes, which agency or church? _____

Health Information

Do you have any physical limitations?

YES

NO

If yes, explain: _____

Do you have any health conditions?

YES

NO

If yes, explain: _____

Special Skills or Qualifications

Please attach a separate sheet answering the following questions. Skills may be ones acquired from employment, previous volunteer work, or through other activities, including hobbies or sports.

- What skills do you have that could be of use to the Food Bank?
- What new skills would you like to learn?
- What are your strengths?
- What are your weaknesses?

Employment History and Goals

Are you currently working full-time or part-time?

YES

NO

If **yes**, where and what type of work do you do? _____

If **no**, where did you last work, what type of work did you do, and why did you leave? _____

Are you currently looking for work?

YES

NO

If **yes**, what type of work? _____

Do you have a resume?

YES

NO

Do you have short-term or long-term employment goals?

YES

NO

If **yes**, what are they? _____

How could the Food Bank help you with your employment goals? _____

Education (circle)

Highest Grade Level Completed	1	2	3	4	5	6	7	8	9	10	11	12
College Completed	Some college			Bachelor's			Master's			Doctorate		

References

Full Name _____

Phone _____

Full Name _____

Phone _____

Our Volunteer Policies

Kauai Food Bank volunteer rules must be acknowledged and signed below!

We value your assistance in the continued success and existence of the Kauai Food Bank. The following rules are designed to protect you and the Kauai Food Bank.

We sincerely hope that when you leave the Kauai Food Bank you have achieved a sense of accomplishment, developed new skills, and inherited many grateful friends.

All volunteers must be neat and clean!

Duties

Daily work assignments will be posted for performing routine duties. Assignment changes may be necessary and requested by the Warehouse Supervisor or Development Project Coordinator.

Safety

All warehouse volunteers:

- Must wear covered footwear, tennis shoes, or boots.
- Must wear comfortable and appropriate clothing. No spaghetti straps, low-cut, or midriff tops and shorts should be longer than the length of your finger tips with your arms hanging at your side.
- May be issued back braces, hand gloves, and other protective clothing by a Food Bank supervisor if needed.
- Must wear a volunteer name tag while in the warehouse.

Supervision

An on-site volunteer supervisor will be available to:

- Answer questions of inquiry.
- Maintain a daily assignment roster.
- Provide hands on training of equipment.
- Maintain daily, weekly, and monthly volunteer records.
- Execute timely rest breaks and lunch periods.
- Provide letters of recommendation and / or references to future employers upon request.

Leaving the warehouse with any food or products or consuming/using Food Bank product will be considered stealing.

There is a staff refrigerator for the food and drinks you may bring from home.

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

Name (printed) _____
Signature _____ Date _____

Office Use Only

Name of Reviewer (printed) _____
Signature of Reviewer _____ Date _____