



# Volunteer Interest Form - Headquarters

Thank you for your interest in volunteering with Outreach International. We appreciate your desire to serve. Please complete the interest form below, and we will respond as soon as possible.

---

## PERSONAL INFORMATION:

First name: \_\_\_\_\_ M.I. \_\_\_\_\_ Last name: \_\_\_\_\_

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip Code) (Country)

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_ Birthday M/D: \_\_\_\_\_

Employer, if applicable: \_\_\_\_\_ Does your company have a matching gifts program?  Yes  No

Community Affiliations/Clubs: \_\_\_\_\_

Special Interests & Skills: \_\_\_\_\_

Previous Volunteer Experience: \_\_\_\_\_

---

## VOLUNTEER PURPOSE:

My schedule will allow me to volunteer (check one):  Frequently  Occasionally  One time

How did you find out about Outreach International? \_\_\_\_\_

How knowledgeable are you about Outreach International?  Very  Somewhat  Never heard of it

### I'm interested in volunteering at the Headquarters Office for:

**Office/Clerical Assistance** – If organizing, processing mail, welcoming guests, stuffing envelopes or a variety of responsibilities appeals to you, this is a great way to help.

**Event Support** – Do you like meeting new people? Welcome visitors and share Outreach International's mission at First Friday evening events on the first Friday of each month.

**Special Projects** – If you like research or other one-off special projects, this might be a great fit.

**Other** – Do you have other skills, experience or interests you'd like to share to expand our work? Tell us!

---

---

---

**VOLUNTEER PURPOSE, Con't:**

What motivates your desire to volunteer for Outreach International? Please rate the following, with 1 being very important, and 4 being not as important:

\_\_\_\_\_ Ability to contribute towards a greater good      \_\_\_\_\_ Commitment to Outreach International’s mission

\_\_\_\_\_ Desire to do something useful with my time      \_\_\_\_\_ Service Hours

Do you need confirmation of service hours?  Yes  No      Number of hours needed \_\_\_\_\_

Completed by (date) \_\_\_\_\_ Name of organization \_\_\_\_\_

**EMERGENCY CONTACT:**

\_\_\_\_\_ Name      \_\_\_\_\_ Relationship      \_\_\_\_\_ Daytime Phone #      \_\_\_\_\_ Alternate Phone #

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Parent or Guardian name if under 18 years old: \_\_\_\_\_

**COMMITMENT:**

I verify that the information I have supplied on this interest form is true and complete. I agree to conform to Outreach International’s rules, regulations and policies.

I release and agree to hold Outreach International, its staff, Board of Directors and officers, harmless from all liability, which might result from an injury while participating in agency volunteer activities.

I understand that upon review of my completed application, I will be contacted by a staff person from Outreach International for an interview. I also understand that volunteer orientation or training may be required.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Please return completed form to the address listed below, or email to [m.penrose@outreachmail.org](mailto:m.penrose@outreachmail.org). Thank you for your interest in being a part of creating lasting solutions for communities.*

**HQ INTERNAL USE ONLY:** Date received \_\_\_\_\_ Response date \_\_\_\_\_

Outreach Contact Name \_\_\_\_\_ Contact date \_\_\_\_\_

Training Received  Yes  No      Date \_\_\_\_\_ Volunteer Scheduled \_\_\_\_\_

**Outreach International**  
112 W. 18<sup>th</sup> Street, Kansas City, MO 64108-1221 USA  
Phone: 816.833.0883 Toll-free: 888.833.1235  
Fax: 816.833.0103