



Individual Volunteer Application

Name (Print): _____

Address: _____

Daytime Phone: _____ Cell Phone: _____

E-mail Address: _____

Emergency Contact: _____

Emergency Contact Phone: _____

Placement Preference: ___ Mercy Shelter and Housing ___ My Sister's Place ___ Greatest Need

1) Would you like an on-going, short-term, or one-time assignment?

On-going

Short-term

One-time

2) What is the reason you want to volunteer?

3) Do you have a skill or area of expertise that you are willing to share? (i.e., graphic design, carpentry, gardening, cooking)

Do you have a particular area you would like to volunteer?

Serve a Meal

Prepare & Deliver a Meal

Prepare & Deliver Dessert

Fundraise

Coordinate a Collection

All Day Service Project

4) Do you have a particular date, day and time in mind?

5) Where are you employed?

* Mercy is continually researching new sources of funding for our programs. Many companies require that employees volunteer with an organization in order to be eligible to apply for funding. By sharing with us your employer's name, you are helping us in our application process for future grant funding opportunities.

6) Are there other opportunities for you, and perhaps your employer, to partner with Mercy Housing and Shelter?

Volunteer on Committee

Grant Funding Opportunity

Gala Sponsorship

Return to: Mercy Housing and Shelter, Attn: Deanna Doerr, Development Office, 118 Main Street, Hartford 06106 P: 860-808-2036; Email: DDoerr@mercyhousingct.org.

Effective: March 2021