



The NJ Sexual Assault Crisis Support & Resources

Replacing Hurt with Hope & Empowerment

Volunteer Application

Last Name _____ First Name _____ MI _____

Address _____

City _____ State _____ Zip Code _____

Is this address: Home? Business? Temporary?

Home Phone: _____ Business Phone _____

Fax _____ E-Mail: _____

Emergency Contact

Name _____ Relationship _____

Address _____

Phone Number _____

Education/Work Experience _____

Let us know why you are interested in volunteer opportunities at NJSACSR.

What training or formal education have you had that might help you volunteer/intern with us?

Are you presently attending school? Yes _____ No _____

Will you receive academic credit for your volunteer/intern work? Yes _____ No _____

Are there any tasks or work that you would not be able to perform as a volunteer/intern?

Yes _____ No _____ If yes, please specify:

Have you ever been convicted of a felony? Yes _____ No _____

If yes, please specify:

How did you learn about the volunteer/intern program at NJSACSR?

Does your employer match your volunteer/intern hours with donations of money or in-kind services?

Yes _____ No _____

Time Availability

Note: We ask our volunteers/intern to make an initial six- month commitment to the program

How many hours per week are you available? _____

If you do not want a weekly schedule, what is your preference?

Indicate in the blocks below the times you most prefer to volunteer/intern:

Monday Tuesday Wednesday Thursday Friday Saturday Sunday

Morning _____

Afternoon _____

Evening _____

Volunteer Interests and Skills Survey (Volunteers only)

There are many opportunities for volunteers to get involved! Please take a moment to share with us the interests and skills you could bring to our work:

Arts & Crafts _____ Sewing/Quilting _____ Jewelry Making _____ Drawing/Painting _____

Organizing Events _____ Support Groups _____ Healing/Restorative Yoga _____

Administrative/Technical

Financial _____ Budgeting _____ Financial Planning _____ Grant Writing/Fundraising _____

Public Relations _____ Graphic Design _____ Public Speaking _____ Marketing _____

Technical Skills _____ Computer Programming _____ Computer Instruction _____ Videography _____

Outreach/Advocacy _____ Legislative Issues _____ Community Organizing _____

Office/Clerical _____ Data Entry _____ Filing _____ Answering Phones _____

Others skills or interests not listed above? Are you passionate about a particular topic?

Recognition

How would you like your efforts to be recognized? _____ Personal thank-you _____ Private Recognition _____
Public Recognition: NJSACSR newsletter and Annual Report _____ Hand-written thank you _____ Small
tokens of appreciation _____ Plaque _____ Certificate _____ Other _____

Signature _____ Date _____

Personal and Professional References

Name _____ Phone _____

Address _____

City _____ State _____ Zip Code _____

Relationship: _____

Name _____ Phone _____

Address _____

City _____ State _____ Zip Code _____

Relationship: _____

Name _____ Phone _____

Address _____

City _____ State _____ Zip Code _____

Relationship: _____