



Party Coordinator Application

Last Name: _____ First Name: _____ Birth date: _____

Complete Mailing Address: _____

Phone (Home): _____ (Work): _____ (Cell): _____ Best? _____

Email: _____ Alternate Email: _____

Are You Currently Employed: Y N (circle)

Employer Name & Address: _____ Start Date: _____

Education: Are You Currently A Student? Y N (circle)

School Name/Address: _____ Graduation: _____

List any special skills or training: _____

Do You Have Prior Volunteer Experience? Y N (circle)

Volunteer Role: _____ Organization: _____ Date(s): _____

Volunteer Role: _____ Organization: _____ Date(s): _____

If you fluently speak any language(s) in addition to English, please list: _____

How did you hear about Birthday Wishes?

Friend Internet Search Volunteer Match Brochure Other (specify): _____

Availability: (Specify days & times)

Weekdays: _____

Weekends: _____

Evenings Only: _____

Emergency Contact Information:

Name/relationship: _____

Address: _____

Phone: (Home): _____ (Work): _____ (Cell): _____

Do you have any physical conditions or limitations we should be aware of? Include any allergies to medications or medications you take regularly for said conditions:

Please answer the following questions:

What are your feelings about homelessness and how it affects children?

Have you had experience working with children? Homeless people? Explain briefly:

Why are you interested in Volunteering with Birthday Wishes?

What needs of your own do expect to fulfill by becoming a volunteer?

Are you seeking a volunteer opportunity to fulfill a requirement? Y N (circle) If so, please describe your program goals and reporting requirements:

How do you like to celebrate your own birthday?
