



*New Generation, Inc.*

## VOLUNTEER QUESTIONNAIRE FORM

Name: \_\_\_\_\_

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

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone: (Home) \_\_\_\_\_ (Office) \_\_\_\_\_

(Cell) \_\_\_\_\_ (Fax) \_\_\_\_\_

Email: \_\_\_\_\_ Date of Birth: Mon \_\_\_ Day \_\_\_

### **I. Skills and Interests**

1. Highest Level of Education: \_\_\_\_\_

2. Current Occupation: \_\_\_\_\_

a. Employer: \_\_\_\_\_

b. Work Schedule: \_\_\_\_\_

3. Previous Volunteer Experience: \_\_\_\_\_

4. Skills (i.e. computer, retail, office, counseling, cooking, etc): \_\_\_\_\_

5. Area of Volunteer Interests: (Check all that apply)

Thrift Shoppe (Greenland \_\_\_\_\_, Rochester \_\_\_\_\_, Seabrook \_\_\_\_\_) Tuesday Sorting Nights \_\_\_\_\_  
(6:30-8:00 for Thrift Shoppes)

Office Help \_\_\_\_\_ Computer IT Skills \_\_\_\_\_ Special Projects/Mailings \_\_\_\_\_

Gardening/Outdoor Projects \_\_\_\_\_ M-F Daytime Driving (Resident Appointments) \_\_\_\_\_

Working w/Residents – Projects group \_\_\_\_\_ / one-on-one \_\_\_\_\_ Mentoring \_\_\_\_\_

Babysitting \_\_\_\_\_

Any other area of interest \_\_\_\_\_

Name: \_\_\_\_\_

## II. Availability

1. At what times are you interested in volunteering?

\_\_\_\_ Flexible      \_\_\_\_ Weekends      \_\_\_\_ Weekdays  
\_\_\_\_ Evenings      \_\_\_\_ Other

2. If driving is a preference, do you have an automobile you can use for volunteer work?  
\_\_\_\_ Yes \_\_\_\_ No (Insurance information must be provided and kept on file)

**How did you happen to find/choose New Generation for your volunteering efforts?  
Check all that apply:**

Newspaper article \_\_\_\_\_, United Way Website \_\_\_\_\_, Signage \_\_\_\_\_, Referral \_\_\_\_\_,  
Thrift Shoppe \_\_\_\_\_, Prior New Generation Volunteer \_\_\_\_\_, Other \_\_\_\_\_

## III. Background

1. Have you ever been convicted of a criminal offense? If yes, please explain.

\_\_\_\_\_

2. Do you have any physical limitations or are you under any course of treatment which might limit your ability to perform certain types of work? If yes, please explain.

\_\_\_\_\_

3. Please list two non-family references whom we might contact:

a. \_\_\_\_\_ Phone: \_\_\_\_\_

b. \_\_\_\_\_ Phone: \_\_\_\_\_

4. Volunteers in direct service with residents/children are required to have a Criminal Background Check.  
The fee is \$25. (Please do not let this be a deterrent for volunteering.)  
My preference: \_\_\_\_\_ I will donate fee      \_\_\_\_\_ New Gen pay fee

**(PLEASE do not mail your check – additional forms must be completed prior to background checks)**

If you have any questions, please feel free to call us at 603.436.4989.  
Please return form to: New Generation, Inc., PO Box 676, Greenland, NH 03840