Volunteer Application Form

*Please return completed applications to Anisa Potvin, CEFS Volunteer Coordinator. Phone: 802-658-7939, Ext. 24 Email: apotvin@cvoeo.org

Chittenden Emergency Food Shelf works to alleviate hunger by feeding people and cultivating opportunities. As the largest direct service emergency food provider in Vermont, CEFS serves over 12,000 people each year.

228 North Winooski Avenue Burlington, VT 05401
Ph. (802) 658-7939 Fax. 802-860-3663
www.feedingchittenden.org

Name:
__________________________________________________________

Date:
__________________________________________________________
Address: ________________________________________________________________
Number                                           Street                                       Apt No.,
______________________________________________________________
City/Town                                     State                                             Postal Code:
Email: _____________________________DOB: ______________________
Occupation: ______________ Highest Level of Education: ___________________
Home #: ____________________         Cell #: ________________________
Are you a student? _____ Yes              _____ No
What school do you attend? ________________________________
What grade or year are you in? ________________________________
In case of emergency, contact:
______________________________________________________________
Relationship: ________________________________________________
Phone Number: ________________________________________________
What type of work would you like to do here?
  o Morning Meal
  o Food Shelf (Grocery Distribution)
  o Warehouse
  o Food Rescue Pick Up
  o Homebound Grocery Delivery
  o Food Truck
  o Office
  o Food Rescue
Desired Volunteer position ____________________________________________
What kind of time commitment do you want to make to the Food Shelf?
  o Long term volunteer  (More than 3 months)
  o Short-term volunteer  (Less than 3 months)
  o One time volunteer
Preferred Communication:
  o Phone
  o Email
Do you want to?
  o Complete City Market Membership Hours
  o Complete Community Service Requirement

Preferred Start Date: ______________________

List any talents and/or skills you bring to your volunteer experience:
________________________________________________________________
________________________________________________________________

Preferred Start Date: ______________________

Please Check the Shift Schedule(s) and Day(s) You Are Available to Volunteer

<table>
<thead>
<tr>
<th>Volunteer Shift Start Times</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
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</thead>
<tbody>
<tr>
<td>Morning Meal 6:00am- 9:30am</td>
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<td>Mornings between 9am-12pm</td>
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<td>Afternoons between 12pm-4pm</td>
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<td>Evenings between 4pm-7pm (Only for Food Truck)</td>
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</table>

List Any Previous or Current Volunteer Experiences:

Name of organization ___________________ Position help: ____________
Date: __/__/___ to ___/___/___
Duties:
Name of organization ___________________ Position help: ____________

Date: __/__/___ to ___/___/___

Duties:
______________________________________________________________________
______________________________________________________________________

Why are you interested in volunteering at the CEFS?
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________

Have you had any experience working with people of diverse cultures?
(Please explain)
______________________________________________________________________
______________________________________________________________________

Languages Spoken: ________________________________________________

Do you have any medical conditions which might affect your service or place of assignment? Please explain.
______________________________________________________________________
______________________________________________________________________

How did you hear about the CEFS and its volunteer program?
______________________________________________________________________
______________________________________________________________________

Have you experienced food insecurity? Do you identify as low-income?
______________________________________________________________________
______________________________________________________________________
______________________________________________________________________

Do you have a day of the week or specific time of day that works best?
______________________________________________________________________
Volunteer Code of Conduct

As a Volunteer, I agree to:

**Be Committed**
- Offer your time and energy only if you truly believe in what you plan to do

**Be a Team Player**
- Remember that volunteering is a team effort
- Play by the rules
- Keep in mind that everyone is here to help

**Be Open to Learning and Hard Work**
- Most volunteers are called upon to learn new and unfamiliar tasks to meet the needs of the people with whom they work.
- Your training is important to the success of your effort

**Be Willing to Accept Supervision**
- A positive attitude and eagerness to take direction will be welcome in any situation
- Remember you are here to help, and doing it the established way will work best

**Be Dependable**
- People will be counting on you
- You need to take your commitment seriously
- Abide by your time and consistency commitment
- Communicate to the Volunteer Coordinator or your site Supervisor when you will be absent or late for your volunteering time
- Read the volunteer newsletter to keep up to date with CEFS

**Be Respectful**
- Respect the cultures, beliefs, opinions and decisions of others, although you may not always agree
- Treat each other with courtesy, sensitivity, tact, consideration and humility
- Accept the chain of command and respect each other regardless of position
- Treat all people as unique individuals and value their beliefs, opinions, knowledge and experiences
- Use appropriate language that will not offend others
- Encourage people to achieve and grow

Signature: ________________________ Date: ______________