

Hopkinton Senior Center Volunteer Application

Name: _____ Date _____

Address: _____
Street Town/State Zip Code

Phone(home) _____ Work/Cell _____

Email: _____

Person(s) to notify in case of an emergency: (Name, Phone # and relationship)

WORK EXPERIENCE

Previous work/occupation: _____

Have you volunteered before? _____ If yes, what did you do? _____

Do you have specific hobbies, interests, training or skills that could be beneficial to the Senior Center? _____

Do you speak any language other than English? _____

Memberships in clubs and organizations? _____

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JOB RELATED INFORMATION

Do you have a preference for a particular task or job? _____

How many hours weekly, biweekly or monthly would you be available? (please list days/time)

Do you have any physical and/or medical condition which should be taken into account when arranging a volunteer assignment? _____

How did you learn about our Senior Center or the program? _____

Are there any comments or suggestions you'd like to make? _____

Please list a personal or work reference:

Name	Address	Phone #
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Note – All volunteers and staff must undergo a CORI (Criminal Offender Record Information check). You will be asked to sign a release form for this purpose.

If you have any questions please contact Sue Stewart, Volunteer Coordinator, by either phone or email: 508/497-9730 ext.1618 or [sstewart@hopkintonma.gov](mailto:ss Stewart@hopkintonma.gov)

Thank you for your interest in the efforts of the Hopkinton Senior Center!