

| Volunteer Information Form (Please Print) | |
|---|--|
| Name (first, last) | Date |
| (Please also give your preferre | d name, if different) |
| Address | |
| (Street / Town / State / Zip) | Birthday (Month/Day) |
| Home phone:C | ell: |
| Email | |
| Are you currently employed? If yes, where? | |
| Work experience. What type of work experience have you | ı had in previous jobs? |
| Volunteer history. Please list any organizations where you | u volunteered and how you served. |
| How did you become interested in volunteering with TI | hrift on Purpose? |
| I have these special skills/hobbies/interests to offer: | |
| Do you have any accommodations (ex: sitting) we need tasks? | d to consider for you to successfully complete |
| Opportunities with a general description are listed below you most. A manager is always available to explain tasProcess: Receive donations, sort into item categories, needed repair, wash dishes, hang clothing, sort books, place | ks and assist as needed. prepare items for retail sales: check items for |
| Retail: Greet and assist customers, add/rotate/remove clear, put away "return rack" items, assist cashiers by bagg | stock to/from the sales floor, keep dressing rooms ging purchases, etc. |
| Cashier: provide courteous customer service at check- price tags), keep counter tidy Housekeeping: dust shelves/displays, keep windows at bathrooms, pick up trash/litter from outside space | |

(1PM-5PM) In most cases, the number of hours a volunteer is available to serve can be flexible. When are you available to serve? Check all of your available/ preferred options. My preferred day(s) and time(s) to volunteer are: (Please check all available options) _Morning ____Afternoon Monday ___Afternoon Tuesday ___Afternoon Wednesday _Morning ____Afternoon Thursday _Morning ____Afternoon Friday Saturday ____Morning ____Afternoon ____ with a frequency of: ____ I am willing to commit _____ 2 hours Twice a week ___ Once a week ___ 2 to 4 hours ___ 2 to 3 times monthly 4+ hours Once a month I prefer to work: ___ Regular schedule ___ Intermittently ___ Other Is there another time that is not listed that you are available and would like to volunteer? Please list. **EMERGENCY CONTACT INFORMATION** In the event of an emergency, notify: Name______Relationship to you_____ Home Phone Cell Phone **Thrift on Purpose Values** Thrift On Purpose is a Mennonite Central Committee (MCC) partner nonprofit organization. Additionally, Thrift on Purpose seeks to relieve poverty and assist those in need by selling merchandise, substantially all of which has been donated, and by providing funds to support the global programs of MCC. We commit ourselves to: Offering a friendly, compassionate presence in the community · Offering our time and talents Receiving and reselling donations • Informing the community about MCC's mission · Supporting MCC by generating income

When are you available to serve? Service shifts are defined as Mornings (9AM-1PM) & Afternoons

I confirm that I have reviewed and can support the statement (above). I confirm that the information in this form is complete and accurate

Date

Signature