



Ava Martin, Director of Philanthropy and Volunteer Engagement

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The goal of the Volunteer Program at CAPTAIN Community Human Services is to recruit volunteers who are interested in giving back to their community in meaningful ways. We strive to provide a variety of volunteer options to match the interests of individuals. On this application is a listing of volunteer opportunities. Be sure to indicate your availability. Training will be provided, so please do not discount any options that you would like to learn more about.

**Contact Information**

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

Email: \_\_\_\_\_

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

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Gender: \_\_\_\_\_ Occupation: \_\_\_\_\_

Please tell us a little bit about yourself and why you would like to volunteer:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you have any areas of special interest and/or abilities? (i.e. mechanical ability, gardening, degree, etc.?)

\_\_\_\_\_  
\_\_\_\_\_

Please describe any of your previous volunteer experiences:

\_\_\_\_\_  
\_\_\_\_\_

Do you have any physical limitations that we should be aware of? Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

How did you learn about CAPTAIN Community Human Services?

\_\_\_\_\_ Newspaper Advertisement    \_\_\_\_\_ Employee Referral    \_\_\_\_\_ Friend or Relative  
\_\_\_\_\_ Internet Advertisement    \_\_\_\_\_ Employment Agency    \_\_\_\_\_ Walk-in  
\_\_\_\_\_ Job Bank    \_\_\_\_\_ Other: \_\_\_\_\_

Have you ever filed an application with us before (employment or volunteer)?

Yes \_\_\_\_\_ No \_\_\_\_\_    If yes, date: \_\_\_\_\_

Have you ever volunteered with us before?

Yes \_\_\_\_\_ No \_\_\_\_\_    If yes, date: \_\_\_\_\_

May we contact your current volunteer organization?    Yes \_\_\_\_\_ No \_\_\_\_\_

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

Do you have a valid and clean driver's license?    Yes \_\_\_\_\_ No \_\_\_\_\_

Have you ever been convicted of, been given probation or deferred adjudication of sentencing, or pleaded no contest for any offense other than a minor traffic violation OR are criminal charges against you currently pending? (A conviction will not necessarily prevent you from volunteering.)

Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please explain fully: \_\_\_\_\_

On what date would you be available to begin volunteering? \_\_\_\_\_

When are you generally available to volunteer? Please check all that apply.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning							
Afternoon							
Evening							

## **Volunteer Opportunities**

### *General Activities*

- \_\_\_\_\_ CAPTAIN's Treasures Next-to-New Clothing Shop – assist customers, sort donations, etc.
- \_\_\_\_\_ Food Pantry – assist guests with obtaining a 3-day supply of emergency food
- \_\_\_\_\_ Van Driver for Food Pantry – food pickups and/or taking people to the Jonesville Pantry
- \_\_\_\_\_ Bike Works program – assist in repairing donated bicycles

### *CAPTAIN CHS Outreach Center (Cheryl's Lodge)*

- \_\_\_\_\_ Homework Help Volunteer – work with elementary school students (school day afternoon)
- \_\_\_\_\_ Homework Help Volunteer – work with middle and high school students (school day afternoons and evenings)
- \_\_\_\_\_ Snack Prep for Homework Help – school days at 2:00pm
- \_\_\_\_\_ Grounds keeping/lawn mowing/as needed building and grounds maintenance help
- \_\_\_\_\_ Summer programming – literacy volunteers, activity leaders

### *CAPTAIN CHS Youth Shelter*

We encourage at least a 1-year commitment to volunteer at the Shelter, as 20 hours of annual training are required. An additional background check and fingerprinting are also required for volunteers in direct contact with youth. More information is available from Shelter staff.

- \_\_\_\_\_ Office work or assisting with holiday programs – opportunity available on an as-needed basis

### *CAPTAIN CHS Street Outreach Project*

- \_\_\_\_\_ Assist with meal preparation and activities at drop-in centers, primarily in Fulton, Montgomery, and Saratoga Counties

### *Family Development*

- \_\_\_\_\_ Family Development Volunteer – mentor individuals and families to increase self-sufficiency

### *Care Links*

- \_\_\_\_\_ Provide supportive services such as transportation, friendly visiting, shopping, and respite to seniors in Southern Saratoga County

### *Teen Activities*

- \_\_\_\_\_ Teen Talk Supervisors – weekday evenings from 5:00-7:00pm during the school year

### *Seasonal and Giving Programs*

- \_\_\_\_\_ Holiday Assistance Programs – organize donations
- \_\_\_\_\_ Tax Assistance Program – prepare and file taxes for low-income families (training provided)

### *Other*

- \_\_\_\_\_ Special Projects and Events
- \_\_\_\_\_ General office work (filing, answering phones, etc.)
- \_\_\_\_\_ Call me on an as-needed basis

Personal or Professional References	
Name	
Company Name	
Address	
Phone Number	
Name	
Company Name	
Address	
Phone Number	
Name	
Company Name	
Address	
Phone Number	

**Volunteer Applicant's Signature**

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this Volunteer Application in order to arrive at a volunteer engagement decision. I consent to appropriate background screenings pursuant to agency policy, which may include checking any or all of the following: NYS Central Register of Child Abuse and Maltreatment, NYS Sex Offender Registry, Social Security verification, and NYS felony criminal conviction check.

In the event of engagement as a volunteer at CAPTAIN Community Human Services, I understand that false or misleading information given in my application or interview(s) may result in discharge. I understand, also, that I am required to abide by all rules and regulations of CAPTAIN Community Human Services.

\_\_\_\_\_  
*Signature of Applicant*

\_\_\_\_\_  
*Date*

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Thank you for your interest in volunteering with CAPTAIN Community Human Services. Please mail or fax this form to the address or number listed on the front page.