

Volunteer Application and Schedule Availability 2012



Thank you for your interest in volunteering at Ironstone Farm! Please complete the following Application and Schedule and mail or fax it back to us.

Name: _____ Date of Birth*: ____/____/____
(*must be 13 to submit application and attend a workshop-no exceptions)

Address: _____ City: _____ State: ____ Zip: _____

Occupation: _____ Place of Business: _____

School Status: _____ School Name & Location: _____

Home Phone: _____ Cell Phone: _____ Work Phone: _____

Email address (please print neatly): _____
(Note: if you give us your email address please expect to receive periodic emails from us, including scheduling)

Best way and time to contact you? _____

Have you ever been convicted of a criminal offense? Yes ____ No ____ If yes, when? _____

Where? _____ Briefly explain: _____

What interests you about becoming a volunteer at Ironstone Farm? _____

How did you hear about the volunteer program at Ironstone Farm?
(e.g., word-of-mouth, flyer, friend, newspaper, Internet, VolunteerMatch, Idealist.org, Senior Corps, City Corps, etc.)

Have you volunteered at Ironstone Farm in the past? Yes ____ No ____

If yes, what were the approximate dates of attendance? _____

Is your volunteer experience a school, college, organization, or company requirement? Yes ____ No ____

If yes, please indicate the number of hours you must complete and the time frame that you need to complete the hours along with any other pertinent information that we should know about your community service requirement.

Tell us about your experiences with:

Horses: _____

Leading/Sidewalking: _____

People with Disabilities: _____

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Are you able to walk for 1-3 hours and jog alongside a trotting horse a short distances? Yes _____ No _____

Are you able to hold your arm above shoulder height and support a rider's weight (when given a chance to switch sides)? Yes _____ No _____

Do you have any health issues or physical limitations that would make leading or sidewalking difficult for you? Yes _____ No _____ If yes, please explain _____

_____ If yes, there are other volunteer opportunities here at Ironstone Farm such as meeting and greeting clients in our Welcome Center. . Please call the Volunteer Coordinator for more information!

OPTIONAL QUESTION:

Do you have any special skills/talents that you would be interested in sharing with the Ironstone Farm programs (e.g., sign language, carpentry, photography, baking, grant writing, foreign language, and special events)?

VOLUNTEER AVAILABILITY:

Please indicate (with a checkmark) the days and times you are available to volunteer. This will aid the volunteer coordinator in scheduling you into a training workshop. Minimum time is 1 hour. Note that most volunteer sessions are usually 2 hours +/- in length. Volunteers are expected to commit to a weekly schedule. If your work schedule changes week to week or month to month, please note below. "X" denotes times we are closed.

	9:30-10	10-11	11-12	12-1	1-2	2-3	3-4	4-5	5-6	6-7:30
M										
T										
W										
Th										
Fr										
Sat								X	X	X
Sun	X	x	X	X	X	X	X	X	X	X

Scheduling Notes that you feel are pertinent to share:

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- 1.) I would like to commit to a regular day and time: Yes ___ No ___
2.) I cannot commit now, but would like to be a substitute: Yes ___ No ___
3.) I would be interested in assisting with occasional office work: Yes ___ No ___
4.) I would be interested in learning more about the working student program*: Yes ___ No ___
5.) I would be interested in learning more the morning feeder program*: Yes ___ No ___
6.) I would be interested in joining a special events committee: Yes ___ No ___
7.) I would be interested in helping with parking at special events: Yes ___ No ___
8.) I would be interested in volunteering in the Welcome Center*: Yes ___ No ___

Individuals are scheduled into training workshops when your availability to volunteer matches our current needs. We strive to bring you for training as quickly as possible! Please be sure to take your work, sports, and/or school schedule into consideration. Do not hesitate to contact the Volunteer Coordinator with any questions or unique circumstances regarding your schedule. Thank you for taking the time to complete this application. We look forward to meeting you in a workshop.

Signature: _____ Date: _____

Signature: _____ Date: _____
(Parent or guardian must also sign if applicant is under 18 yrs of age)

OFFICE USE ONLY:

Application Received: _____ Contacted: _____ Workshop Date: _____

Workshop successfully completed _____ / _____

Forms: [] Volunteer Emergency Release [] Code of Ethics [] SORI/CORI

Scheduled: _____

Comments: _____

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