



HORIZONS FOR HOMELESS CHILDREN

Horizons for Homeless Children Volunteer Application Form

**Thank you for your interest in volunteering with Horizons for Homeless Children.
Please fill out the application below and return all three pages to the office in which you are interested
in volunteering. A member of our Playspace Programs will be in touch soon.**

Which area are you interested in volunteering?

Greater Boston

Please complete and return to: Fax: 617.522.9910

Horizons for Homeless Children, Volunteering, 1705 Columbus Avenue, Roxbury, MA 02119

Central Region (Worcester County, Framingham, Attleboro and surrounding areas)

Please complete and return to: Fax: 508.755.3485

Horizons for Homeless Children, 237 Millbury Street, Worcester, MA 01610

Northeast Region (Lawrence, Lynn, Peabody, Haverhill, Gloucester, Lowell and surrounding area)

Please complete and return to: Fax: 978.557.2184

Horizons for Homeless Children, 60 Island Street, Lawrence, MA 01840

Southeast Region (South Shore, Cape Cod and Southeast coastal communities)

Please complete and return to: Fax: 508.999.9455

Horizons for Homeless Children, 888 Purchase Street, Suite 304, New Bedford, MA 02740

Western Region (Holyoke, Springfield, Northampton and surrounding area)

Please complete and return to: Fax: 413.532.0531

Horizons for Homeless Children, 4 Open Square Way, Suite 132, Holyoke, MA 01040

Which Playspace Activity Leader training will you attend?

Please note you can attend any of the training sessions and then volunteer in your desired region.

July 2010

Central Region

Wednesday, July 28th and Thursday, July 29th

6:00 - 9:00pm (must attend both evenings)

Becker College, Weller Academic Bldg., 61 Sever St., Worcester

Applications due July 26th, 2010 (after deadline, please call 508.755.2615 to check if there is still room at the training).

August 2010

Southeast Region

Tuesday, August 3rd and Wednesday, August 4th

6:00 - 9:00pm (must attend both evenings)

New Bedford, MA

Applications due July 30th, 2010 (after deadline, please call 508.999.9454 to check if there is still room at the training).

September 2010

Northeast Region

Saturday, September 18th

9:30am - 4:30pm

Lawrence, MA

Applications due September 16th, 2010 (after deadline, please call 978.557.2182 to check if there is still room at the training).

West Region

Saturday, September 18th

9:30am - 4:30pm

Mt. Holyoke College, South Hadley, MA

Applications due September 16th, 2010 (after deadline, please call 413.532.0467 to check if there is still room at the training).

Greater Boston Region

Saturday, September 25th

9:30am - 4:30pm

Boston, MA

Applications due September 23rd, 2010 (after deadline, please call 617.445.1480 to check if there is still room at the training).

Volunteer Commitment: Do you have two hours a week to volunteer?

Yes, Mon-Thurs: 8am-8pm and/or Fri: 8am- 6pm

No, I do not have 2 hours a week

Can you commit to volunteering for at least six months? Yes No

Contact Information:

First Name _____ Last Name _____

Street _____ Apt #: _____

City _____ State _____ Zip _____

Home #: _____ Work #: _____ Cell _____

Email Address: _____

In case of emergency please contact:

Name _____ Relationship _____

Home #: _____ Work #: _____ Cell : _____

Ethnicity (optional):

African American Asian/Pacific Islander Other _____

West Indian/Caribbean Native American

Latino Caucasian

What language(s), other than English, do you speak fluently? _____

Date of Birth _____ **Gender** _____

-Profession:

Occupation/Student _____

Company/Organization/School _____

If employed, company address: _____

How did you hear about Horizons for Homeless Children? (check all that apply)

Website (which one?) _____

Word of mouth (who?) _____

Ad on T or bus (which line?) _____

At an event or volunteer fair (please specify) _____

Radio/TV (which station?) _____

Newspaper (which paper?) _____

Flyer/Brochure _____

Other (please specify) _____

Why would you like to work on behalf of homeless children? _____

What do you hope to gain from this volunteer experience? _____

Please list other volunteer experiences, if any (specify dates, organizations, roles): _____

Although not required, do you have any experience with homelessness or "at risk" children? If yes, please list experience(s). _____

What challenges do you expect in volunteering with us? _____

Is there additional information you would like to let us know? _____

Please check all that apply:

- I am CPR certified
- I have received MMR vaccination (measles, mumps, rubella)
- I have had the chicken pox
- I have had a recent TB test. When? _____

References:

Please list the names and daytime phone numbers of two references (do not use family members or significant others). If possible list at least one reference from your job (paid or volunteer) or school and one reference who has seen you interact with children.

Name _____ Phone _____

Name _____ Phone _____

THANK YOU!