



3150 LILLY ROAD, BROOKFIELD WISCONSIN 53005
(262) 781-0550

Adult Volunteer Application

Date: _____ Birthday (year optional): _____

Last Name	First Name	M.I.
Nickname (For Name Badge)	Home Phone	
Address	Mobile Phone	
Apt. #	Alternate Phone	
City	State	Zip
		E-mail Address

What is the best way for us to reach you?

E-mail Phone Best time to call? _____ Other (Please Specify) _____

Why would you like to volunteer at the Congregational Home? _____

What would you like to get out of your volunteering experience? _____

How much time are you interested in spending as a volunteer? _____

Education and Work Experience	
Current Employer	High School
Work Phone	College
Position Responsibilities	College Major
	Advanced Degrees/Certificates
Name of School (If Applicable)	

Availability								
Please check the boxes for the days and times you are most often available to volunteer.		S	M	T	W	T	F	S
	Morning							
	Afternoon							
	Evening							

Please complete the back of this application, too.

