



## VOLUNTEER PROFILE

Date: \_\_\_\_\_

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

Primary 12-Step Program Involvement – if applicable (*optional*): \_\_\_\_\_

Sobriety Date – if applicable (*optional*): \_\_\_\_\_

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

Home Address:

\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Please provide a phone number where you prefer to receive calls: \_\_\_\_\_

What kind of number is this? (*please check one*) Cell \_\_\_\_\_ Home \_\_\_\_\_ Work \_\_\_\_\_

When are you available for volunteer opportunities? (*check all that apply*)

\_\_\_\_\_ days \_\_\_\_\_ evenings \_\_\_\_\_ weekends \_\_\_\_\_ anytime

Skills, Talents, Special Interests:

Previous Volunteer Experience:

Professional and Community Affiliations:

(*recent and current; please note any offices held*)

I would be interested in the following, please check all that apply:

- Share my story with active clients (if in 12-step recovery)
- Provide temp sponsorship or rides to local 12 step meetings
- Donating my time and abilities in building projects (please list what types of abilities that may prove useful to our agency) \_\_\_\_\_  
\_\_\_\_\_
- Attending sober activities
- Organize and plan sober activities
- Be a part of the planning of yearly activities and be a decision maker for the alumni association
- Be interested in completing service projects in my community
- Help with fundraising for the organization
- Help with fundraising for the Alumni Association
- Be considered for a board member position when a spot would open up
- I would like to stay on the email list; however I do not wish to commit to anything at this time.

I have access to: *(check all that apply)*

**Relationships**

News Media	
State Agencies	
County Agencies	
Community Business Leaders	
People with Experience	
People with Money	

Pennsylvania/ New Jersey Political Persons/Groups	
Local Political Persons/Groups	
Foundations	
Other ( <i>specify</i> )	

**Please use key code for next section:**

- A – High Ability
- B – Moderate Ability
- C – Some Ability
- If none, leave blank

**Areas of Expertise**

Management	
Financial Planning	
Accounting/Bookkeeping	
Marketing	
Supervisory Experience	
Fundraising	
Human Relations	
Legal Issues	
Policy Making	
Medical Training	
Facility Management	
Social Services	
Program Planning	
Art/Graphic Design	
Writing Skills	
Public Speaking	
Communication/Media	
Photography Skills	
Other	

**Age**

Under 18	
19-39	
40-64	
65 or older	