



PHINNEY NEIGHBORHOOD ASSOCIATION

The mission of the PNA is to build community by providing and promoting programs, services, & activities aimed at connecting neighbors and fostering civic involvement in our diverse community.

Volunteer Application

Name: _____ Date: _____

Mailing Address: _____ City & Zip _____

E-mail Address: _____

Phone: Home _____ Cell _____

Profession/Employer _____

Are you interested in volunteering your professional services? _____

Does your employer offer a program to match your volunteer hours or otherwise support organizations for which you volunteer? If so, what form does it take? _____

Student/School _____

Are you volunteering to fulfill a service requirement? Yes No

How many hours do you need? _____

What is your deadline? _____

Is this a requirement for school court* other _____

* We have an alternate application packet for court-involved service volunteers.

Availability/Preferred Times to Volunteer

Weekdays _____

Evenings _____ Weekends _____

What are your volunteer interests? _____

What prior experience do you have with volunteering? _____

Do you have any concerns about volunteering? _____

Emergency Contact: Name _____ Phone _____

The PNA does not discriminate on the basis of race, color, creed, age, religion, sexual preference, handicapping condition, ancestry, veteran's status, gender identity, or any other characteristic protected by law.

Questions? Call 783-2244 or e-mail Judith@phinneycenter.org. Please return this form to Judith Wood by fax to 206/783-2246 or mail to 6532 Phinney Avenue N. Seattle, WA 98103.