East Bay Depot for Creative Reuse
VOLUNTEER APPLICATION

DATE _________ NAME ____________________________________________

ADDRESS _______________________________________________________

CITY _______________________________ ZIP _________________________

HOME PHONE _______________ WORK/CELL PHONE _______________

EMAIL ADDRESS ________________________________________________

CURRENT EMPLOYMENT (if not working, previous employment) including dates, employer and your responsibilities.

VOLUNTEER EXPERIENCE: (organization/ agency, when, and what you did)

VOLUNTEERING AT THE DEPOT REQUIRES A COMMITMENT OF FOUR HOURS PER MONTH. PLEASE INDICATE WHEN YOU CAN VOLUNTEER

<table>
<thead>
<tr>
<th></th>
<th>MON</th>
<th>TUES</th>
<th>WED</th>
<th>THURS</th>
<th>FRI</th>
<th>SAT</th>
<th>SUN</th>
</tr>
</thead>
<tbody>
<tr>
<td>11:00 – 1:00</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1:00 – 3:00</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3:00 – 5:00</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Please continue on reverse
SKILLS AND AREAS OF INTEREST

___Art   ___Education   ___Crafts/Sewing   ___Collectibles/Antiques
___Books/Magazines/Media   ___Computer   ___Environment   ___Design

Other ______________________________________________________

WHICH VOLUNTEER OPPORTUNITIES ARE YOU INTERESTED IN?

_____ Donation solicitation

_____ Events and outreach

_____ Tidying store and keeping materials organized

_____ Sorting donations

_____ Creating/maintaining signage

_____ Office assistance (mailings, phone calls, etc)

REFERENCES
Please provide names and contact information for three references

1. Name ______________________   Phone _________________
2. Name ______________________   Phone _________________
3. Name ______________________   Phone _________________

Thank you for your interest in volunteering at the Depot. A staff member will contact you soon.