Please complete application and email to:
info@city-green.org

OR print and send to:
City Green, PO Box 748,
Ringwood, NJ 07456

City Green, Inc.

Volunteer Application

Name: _____

Address: _____

City/State/Zip: _____

Phone: (work) _____ (home) _____ (cell)_____

E-mail: _____

Availability _____

Education: (check one) ___Elementary ___High School ___College ___Grad School

Other: _____

Are you volunteering to fulfill a school or community service requirement?

___ Yes ___ No If yes, number of hours required _____

How did you hear about our Program?

___ Current Volunteer ___ City Green Website ___ Newspaper ___ Volunteer Match

___ Bergen Volunteers ___ Jersey Cares ___ Patersononline.net

Other _____

Are you interested in volunteering as a: (please check one)

___ Auxiliary Volunteer ___ Garden Resource Center ___ Horticulture

___ Educator at The Learning Garden ___ On-call Special Events Volunteer ___ Special Guest

___ Garden Volunteer ___ Youth Garden Programming

What experience do you have helping others (formally or informally)?

List any special skills and/or interests that you would be willing to share with the program.

Why are you interested in volunteering for this program?

What do you hope to gain from this experience?

Employer (If employed):

May we contact your employer? ☐ Yes ☐ No

Please describe your work experience; past jobs, trainings, etc.:

References (Other than family):

Name: _____ Name: _____

Daytime phone: _____ Daytime phone: _____

Relationship: _____ Relationship: _____

Do you speak any languages other than English? ☐ Yes ☐ No If yes, please specify

Please provide us with any other information you would like to share about yourself, your experience, your qualifications special skills or your interest in volunteering:

In case of emergency contact:

1)Name_____Phone #_____

2)Name_____Phone #_____

Please describe any medical conditions you have that may be prohibitive for a volunteer gardening position: _____

A security check is required for all volunteers with our agency. Would you be willing to have a security check completed? ☐ Yes ☐ No

Certification and Authorization:

I certify that the information provided in the Volunteer Application is true, correct and complete. I authorize verification of all statements contained in this Application. I authorize former employers and/or educational institutions to provide information concerning me, and I release them from providing any such information to City Green, Inc.

_____

Signature Date