

DWELLING AT THE WELL VOLUNTEER INTEREST FORM

NAME (Type or Print)	PHONE (May we text you? Y N _)
NAME OF COMMUNITY/NEIGHBORHOOD YOU LIVE IN	EMAIL ADDRESS	
AVAILABILITY (Days and Times):		
Monday Tuesday Wednesday Thursday _	Friday S	Saturday Sunday
Mornings From To Afternoons From	To I	Evenings From To
AREA(S) YOU WOULD LIKE TO VOLUNTEER (Mark all the apply):		
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Social Media In-Kind Donations Outreach Team		
Marketing / Media / Design Events Website Administrative		
GENDER / AGE / RACE / STATUS		
These questions are for participant statistical and demographic data only.		
GENDER: F M Trans F Trans M AGE: 0-18 19-24 25-59 60+		
RACE*: N B L A W Multi VET:	Y N _	DISABLED: Y N
*N = Native, B = Black, L = Latino, A = Asian/Indian, W = White, Multi = Multi Racial		
What are your talents and interests?		
Are you comfortable dealing with the public? (Volunteering may require interaction) Yes No		
To you dominor tubic doubling with the public. (volunteering may require interaction)		
What, if any, is your experience with women with substance abuse disorders?		
What do you hope to gain from this experience?		