Updated 10/19



900 Middle Road — Highland, MI 48357 Phone 248.887.1597 Fax 248.887.7990 Email bbacon@freedomwork.org www.freedomwork.org

Volunteer Application

First Name		Last Name
Street address		
		Zip Code
Phone #		Email
		employed by this organization? []Yes [] No
Are you interested in re	eceiving FWO's	Emails? []Yes [] No
Section II: Availabilit	y and interests i	<u>in work</u>
Are you volunteering th	ırough a progran	m, business or School []Yes []No
If yes, what is the name	of the program/	/business/school:
If you have a contact po	erson for your pro	rogram or school, what is their:
Name:	P	Phone # or email:
Are you interested in vo		c Time Frame:
On which days are you [] Monday [] Tuesda		unteer [] Any ny [] Thursday [] Friday [] Saturday [] Sunday
What hours are you ava	ilable to volunte	eer?
On what date are you a	vailable to start v	volunteering?
What location(s) or cre	ws are you intere	ested in volunteering at/with?

Our Mission: "Empowering those we serve with FREEDOM to obtain supportive, integrated WORK skills and OPPORTUNITIES to excel"



Section II continued

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Are you applying for a specific volunteer	position [] Yes [] No
If yes, what position?	
Please list any qualifications or trainings	that may be useful during your volunteering?
	unteer with us,
riease tens us willy you would like to voi	uniteer with us,
Section III: References	
Please give the names of 2 personal refer have known at least one year:	rences from persons not related to you, whom you
Name:	Phone#:
Name:	Phone#:
Signature	
	Freedom Work Opportunities, Inc. does not entitle s for our Board of Directors*
**Drop off application to any of our loca	ations or email to bbacon@freedomwork.org
FWO Use Only Approved by:	Date: