

Salem Gospel Migrant Social Ministries

Volunteer Application

Contact Information

Name	
Street Address	
City, State, ZIP Code	
Home Phone	
Cell Phone	
E-Mail	

Availability

During which hours are you available for volunteer assignments? Please review the options below and circle the appropriate time of the day that you're available during the weekday or the weekend. Then, write the hours that you're available in the space provided.

1. I'm available weekday mornings/afternoons/evenings. The hours I'm available are _____.
2. I'm available weekend mornings/afternoons/evenings. The hours I'm available are _____.
3. I'm available for Special Events (Volunteers will be contacted for the day/time of Special Events).

Interests

Tell us in which areas you are interested in volunteering

Tutoring Program for children ages 7-18

The tutoring program involves meeting one time each week in the evening and assisting children of all ages with their academic work.

Life Skills Workshops

Workshops are held every other Saturday of each month at the Patterson Park Baptist Church. Workshops focus on topics aimed at challenges unique to immigrant children. These topics include, but are not limited to the following:

- Health and hygiene in the home
- Nutrition and dental care
- Exercise and involvement in organized athletics
- Drugs, violence, and bullying
- College preparation
- Responsible use of money (establishing checking/savings accounts; using credit wisely, etc)
- Other topics as requested by the children

Volunteers with a strong interest/background in a particular subject are needed to teach the workshops. Volunteers are also needed to generally assist with the conduct of each workshop.

___ Migrant Women Wellbeing Group

This group meets on a regular basis to discuss issues affecting migrant women. Volunteers are needed to lead group discussions.

___ Newsletter Production

Special Skills or Qualifications

Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports. Please indicate if you have proficiency in the French language.

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Previous Volunteer Experience

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Person to Notify in Case of Emergency

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone	
E-Mail Address	

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

Name (printed)	
Signature	
Date	

Our Policy

It is the policy of the Salem Gospel Migrant Social Ministries to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

Thank you for completing this application form and for your interest in volunteering with us! A representative from SGMSM will contact you within 2 working days to speak with you regarding the available volunteer opportunities