



HOPE STATION

Wilson County Interfaith Services, Inc.

Volunteer Application

(PLEASE PRINT CLEARLY)

NAME _____

ADDRESS _____

CITY _____

ZIP _____

HOME PHONE _____

CELL PHONE _____

EMAIL _____

DAYS & TIMES WHEN ARE YOU AVAILABLE TO VOLUNTEER?

DAY	MON	TUES	WED	THURS	FRI	SAT
MORNING						
AFTERNOON						
EVENING						

HOW MANY HOURS? _____ PER WEEK _____ PER MONTH

TYPE OF VOLUNTEER SERVICE:

I just want to volunteer

Volunteer for school-based community service hours (Deadline: _____)

Work First / Wilson Housing Authority / Food Stamps / other program

Volunteer for court-assigned community service hours (Deadline: _____)

Please explain: _____

SKILLS TO OFFER: _____

REFERRED TO HOPE STATION BY: _____

OTHER NOTES: _____

Wilson County Interfaith Services, Inc dba HOPE STATION

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252.291.7278 (day) | 252.237.7078 (fax & night) | www.hopestation-wilson.org

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