



Volunteer Request Form

PERSONAL INFORMATION

First Name: _____ Last Name: _____

Address: _____ City: _____

State: _____ Zip Code: _____ Phone Number: _____

E-Mail Address: _____

How did you hear about us: ☐ Friend ☐ Another Volunteer ☐ School ☐ Internet ☐ Media ☐ Other:
(Please specify): _____

Are you Florida Licensed Professional?

Yes ☐

No ☐

If yes, please specify your specialty and years of experience in your field of expertise. _____

Will you be receiving certification/academic or internship credit?

☐ Yes

☐ No

If yes, please indicate the program/school/degree and total of hours needed. _____

Why are you seeking volunteer opportunities?

Please share your motivation for volunteering with us. _____

Are you able to provide a minimum of 3 months service hours?

Yes ☒

No ☐

SKILLS AND INTERESTS

What type of volunteer work are you interested in? Please check one or add additional ones.

Outreach Event

Translation (Haitian-Creole to English)

Sante Pam TV Show Assistant

Social Media Assistant

Licensed Professional Services

Other:.....

List any of your special skills/training?

PC Skills: MS Office (Word, Excel, Outlook, Powerpoint)

Other:.....

What is your availability? (Please indicate below the days/times that you are available to volunteer)

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Other than English, do you speak other languages? If yes please indicate language and proficiency.

- Language: _____ Able to translate: ☐ Yes ☐ No
- Language: _____ Able to translate: ☐ Yes ☐ No

EXPERIENCE

Do you have any previous volunteer experience? ☐ Yes ☐ No

If yes, please explain when, where and duties performed:

AGREEMENT AND SIGNATURE

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

Signature: _____ Date: _____

OUR POLICY

It is Sante Pam Organization INC policy to provide equal opportunities without regard to race, color, religion national origin, gender, sexual preference, age or disability.

As a volunteer-based 501(c) 3, we rely on the kindness of our volunteers to provide quality services or support to low-income residents in South Florida. It's our goal to best match your skill sets to our current needs. If there be a possible match, we will contact you to further discuss how we may work together.

Thank you for completing the form below and for your interest in volunteering with Sante Pam Organization INC. Together, we can make South Florida healthier!