



Volunteer Memphis
AGENCY REQUEST FOR VOLUNTEERS

VOLUNTEER MEMPHIS

Complete one form for EACH volunteer position. Please make additional copies of this form before completing.

Agency _____ Today's date _____

Address _____ Zip _____

Contact Person _____ Phone _____ Ext. _____

Email address _____

If this request is for a special event, please give name and location of event: _____

Title of Volunteer Position: _____

Days / dates volunteers are needed : _____ Times needed (shifts available?): _____

Length of commitment: Long-term _____ Short-term _____ Occasional _____ Special event _____

How many volunteers are needed: _____ Special skills needed: _____

Description of volunteer position (tasks to be done): _____

Other Volunteer Requirements (check all that apply):

- ➡ **MINIMUM VOLUNTEER AGE:** _____ **Site is wheelchair accessible:** _____
- Minimum age of child with adult:** _____ **Orientation provided:** _____
- Can be done by home-based volunteers:** _____ **Training provided (give details below if desired):** _____
- Court ordered volunteers accepted:** _____ **Background check required:** _____

Additional comments: _____

Completed by: _____ Title: _____

Requests MUST be submitted by the 10th of the month for inclusion in the next month's Volunteer Now calendar!

MAIL OR FAX TO: Volunteer Memphis
22 N. Front Street, Suite 780
Memphis, TN 38103
Phone: 901-523-2425
FAX: 901-523-7107
www.volunteermemphis.org

OFFICE USE ONLY	
VICTA _____	
Calendar _____	
Tips _____	
Web _____	
