

TEACHING AND RESTORING YOUTH

a place for young women to find new hope

VOLUNTEER INFORMATION FORM

Name: _____

Address: _____

School / Group with: _____

Phone: Home _____ Work _____ Cell _____

Email Address: _____

Referred by: _____

Days / Times Available: _____

Service Learning Hours: Y__ N__ #Hours Required _____ #People in Group _____

Have you worked with adolescents? _____

In what capacity? _____

Why did you choose TRY: _____

Do you have any special talents? _____

Areas of interest to volunteer in:

Spending time with the young women

Teaching arts / crafts

Teaching a class in _____

Cooking dinner with the girls

Working around TRY house (painting / maintenance / other)

Answering the phones and clerical work

Fundraising

Helping out at special events

Public Relations