



## The Queens Galley Volunteer Application

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

PHONE: (home) \_\_\_\_\_ (business) \_\_\_\_\_ (cell) \_\_\_\_\_.

ADDRESS: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_

Position Applying for: **Chef** or **Nutrition Educator** or **Administrative Assistant** or **Other**

Are you 18 or older: Yes No How did you hear about us? \_\_\_\_\_

Employer: \_\_\_\_\_ Position: \_\_\_\_\_

Education: Received High School Degree  
Received College Degree, if so in \_\_\_\_\_  
Master's Degree, if so in \_\_\_\_\_  
R.D. Other \_\_\_\_\_

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### AVAILABILITY

How many hours a week do you see yourself volunteering? \_\_\_\_\_

When are you available to volunteer? Please state specific days of the week: \_\_\_\_\_

Weekday mornings Weekday afternoons Weekday evenings

Do you have access to a vehicle that you'd be willing to use while volunteering? yes no

What is the best way to reach you? Home phone work phone cell phone email

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### SKILLS/INTERESTS

What are some skills or interests you'd like to share while volunteering? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

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Do you speak any languages other than English? Please list additional language skills: \_\_\_\_\_

### PERSONAL INFORMATION

Why do you want to volunteer with the Queens Galley?

\_\_\_\_\_  
\_\_\_\_\_

Describe your previous experience, if any, in teaching nutrition and cooking.

\_\_\_\_\_  
\_\_\_\_\_

Describe your experience working with low-income people from diverse backgrounds.

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**REFERENCES** (Work or Volunteer-Related)

Name/relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Name/relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

**Note:** Various State background checks may be conducted on applicants before they can become volunteers.

**EMERGENCY CONTACT**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

I authorize the Queens Galley to contact the references named above for the purposes of determining an appropriate and satisfactory volunteer position for me.

Applicant's signature: \_\_\_\_\_ Date: \_\_\_\_\_

Check this box if you do not wish to receive The Queens Galley newsletter and other mailings about the Queens Galley.

**Please send your completed application to:**

The Queens Galley 254 Washington ave Kingston NY 12401 or e-mail to [volunteers@thequeensgalley.org](mailto:volunteers@thequeensgalley.org)  
For general info on volunteering, call Diane Reeder at (845) 901-0341 or (845) 338-3468

For internal use only:

Entered in database \_\_\_\_\_

References \_\_\_\_\_

First contact \_\_\_\_\_

Background Check \_\_\_\_\_

Interviewed \_\_\_\_\_

Placed \_\_\_\_\_

Notes: