



Volunteer Application Form

Girls Incorporated of Jefferson County
109 West Third Street, Madison, IN 47250
812-265-5863

Personal Details (required for a background check)

Name (first, middle, last):

Address:

Zipcode:

Telephone Number:

Email:

Date of Birth:

Race:

Sex: M F (please circle one)

1. How many hours are you available to volunteer per month?

2. What type of volunteering are you hoping to do? (please check all that apply)

- Fundraising events (luncheon, Foodstock event)
- Direct service with members (homework help, direct programming)
- Office help/administration

3. Do you have any experience volunteering with Girls Inc., or other after-school/summer programs? If yes, which ones?

4. Please write a few sentences about why you want to volunteer at Girls Inc. Please be sure to include what skills or talents you can bring to Girls Inc. that would be beneficial to our mission of “inspiring all girls to be strong, smart, and bold.”
