



TACOMA  
**COMMUNITYHOUSE**  
 EDUCATION EMPLOYMENT IMMIGRATION ADVOCACY  
 SINCE 1910

# Volunteer Intake Packet



Name: \_\_\_\_\_ Date: \_\_\_\_\_

Preferred Orientation Date (See options on TCH's Volunteer webpage): \_\_\_\_\_

Are you a current or former TCH client?  No  Yes (Program: \_\_\_\_\_)

## Areas of Volunteer Interest

Check all areas that you would be interested in exploring as a volunteer. (Note: BEdA refers to Basic Education for Adults classes and ELA refers to English Language Acquisition classes.)

### EDUCATION

- BEdA Tutor/Classroom Asst.
- ELA Tutor/Classroom Asst.
- Computer Lab Assistant
- Talk Time @ Noon
- Other: \_\_\_\_\_

### EMPLOYMENT

- Classroom Assistant
- Administrative Work
- Outreach
- Other: \_\_\_\_\_

### IMMIGRATION

- Administrative Work
- Citizenship Class Asst.
- Other: \_\_\_\_\_

### ADVOCACY

- Data Analysis
- Research
- Social Work (MSWs Only)
- Other: \_\_\_\_\_

### DEVELOPMENT & COMMUNICATIONS

- Special Events
- Outreach
- Writing/Editing
- Photography
- Other: \_\_\_\_\_

### READ2ME (CHILD LITERACY PROGRAM)

- Tutor
- Other: \_\_\_\_\_

### ADMINISTRATION

- Reception
- Ground Maintenance
- Other: \_\_\_\_\_

### INTERPRETATION SERVICES

- Language(s): \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_



# Volunteer Intake Application

TCHID (Internal Use Only): \_\_\_\_\_

Date: \_\_\_\_\_

## Demographics Information

<b>Last Name</b>		<b>First Name</b>		<b>Aliases (e.g., Maiden Name)</b>	
<b>Address</b>			<b>City</b>	<b>Zip</b>	
<b>Home Phone</b>	<b>Cell Phone</b>	<b>Date of Birth</b>	<b>Gender</b>		
			<input type="checkbox"/> F <input type="checkbox"/> M <input type="checkbox"/> FTM <input type="checkbox"/> MTF <input type="checkbox"/> Non-Binary		

### Email Address

\_\_\_\_\_

**Race**

<input type="checkbox"/> Asian	<input type="checkbox"/> Hispanic/Latino	<input type="checkbox"/> Native Hawaiian	<input type="checkbox"/> Black	<input type="checkbox"/> White
<input type="checkbox"/> Pacific Islander	<input type="checkbox"/> Other/Multi-Racial	<input type="checkbox"/> Unknown		
<input type="checkbox"/> Native American	<input type="checkbox"/> Middle Eastern	<input type="checkbox"/> Native Alaskan		

**Employment Status**    Employed    Unemployed    Student    Military    Retired

**Highest Level of Education Completed**

<input type="checkbox"/> H.S. Diploma	<input type="checkbox"/> GED
<input type="checkbox"/> Some College	<input type="checkbox"/> 2-Year College Degree
<input type="checkbox"/> 4-Year College Degree	<input type="checkbox"/> Graduate Degree

<b>Emergency Contact</b>	<b>Emergency Phone</b>	<b>Relationship</b>
_____	_____	_____

## Specific Interests and Availability

<b>Interns</b> Start Date: _____  Hours/Week: _____	School Attending: _____					
	Internship Completion Date: _____					
	<b>MONDAY</b>	<b>TUESDAY</b>	<b>WEDNESDAY</b>	<b>THURSDAY</b>	<b>FRIDAY</b>	<b>SATURDAY</b>
<input type="checkbox"/> Mornings	<input type="checkbox"/> Mornings	<input type="checkbox"/> Mornings	<input type="checkbox"/> Mornings	<input type="checkbox"/> Mornings	<input type="checkbox"/> Mornings	
<input type="checkbox"/> Afternoons	<input type="checkbox"/> Afternoons	<input type="checkbox"/> Afternoons	<input type="checkbox"/> Afternoons	<input type="checkbox"/> Afternoons	<input type="checkbox"/> Afternoons	
<input type="checkbox"/> Evenings	<input type="checkbox"/> Evenings	<input type="checkbox"/> Evenings	<input type="checkbox"/> Evenings	<input type="checkbox"/> Evenings	<input type="checkbox"/> Evenings	

<b>Volunteers</b> Start Date: _____  Hours/Week: _____	What area(s) are you interested in volunteering in?					
	<input type="checkbox"/> Administrative	<input type="checkbox"/> Employment	<input type="checkbox"/> Development	<input type="checkbox"/> Talk Time		
	<input type="checkbox"/> Education	<input type="checkbox"/> Immigration	<input type="checkbox"/> Outreach	<input type="checkbox"/> Other		
	<input type="checkbox"/> Computer Lab	<input type="checkbox"/> Citizenship				
Would you be interested in providing administrative support? <input type="checkbox"/> Yes <input type="checkbox"/> No						
<b>MONDAY</b>	<b>TUESDAY</b>	<b>WEDNESDAY</b>	<b>THURSDAY</b>	<b>FRIDAY</b>	<b>SATURDAY</b>	
<input type="checkbox"/> Mornings	<input type="checkbox"/> Mornings	<input type="checkbox"/> Mornings	<input type="checkbox"/> Mornings	<input type="checkbox"/> Mornings	<input type="checkbox"/> Mornings	
<input type="checkbox"/> Afternoons	<input type="checkbox"/> Afternoons	<input type="checkbox"/> Afternoons	<input type="checkbox"/> Afternoons	<input type="checkbox"/> Afternoons	<input type="checkbox"/> Afternoons	
<input type="checkbox"/> Evenings	<input type="checkbox"/> Evenings	<input type="checkbox"/> Evenings	<input type="checkbox"/> Evenings	<input type="checkbox"/> Evenings	<input type="checkbox"/> Evenings	

**Would you be interested in working on a special event?**    Yes    No    Maybe

(For example: Annual Luncheon, FLAVOR dining fundraiser, tabling at festivals, etc.)

## General Information

### How did you first hear about Tacoma Community House?

- Email / Newsletter     Social Media     Hot Line     Website / Search Engine  
 Family / Friend     In House     Other Agency     Poster / Flyer / Sign  
 Schools / Colleges     Word of Mouth

What skills will you bring to TCH (e.g. event planning, data entry, copy editing, etc.)?

Are you fluent in other languages? If yes, please list.     Yes: \_\_\_\_\_     No

Do you have any limitations that may affect your ability to volunteer? If yes, please describe.     Yes     No

Are you a member of any civic, social, professional, or faith organizations (e.g., Rotary, UMW)? Describe.     Yes     No

May we use your name in our publications?     Yes     No

## Criminal Background Information

As a service organization, we must screen all volunteers to ensure the safety of clients, staff, visitors, event participants, and other volunteers. If you have a criminal history or there is a question, you will be contacted by a Volunteer Services staff member. A positive check will not automatically bar you from volunteering. All results will be attached to your application and will remain strictly confidential.

I understand that Tacoma Community House will conduct a Washington State Patrol Criminal Background Check on me.

- Yes     No

Have you been convicted of any criminal offense or released from prison within the last seven years? If yes, please explain.

- No     Yes: \_\_\_\_\_

## References (please list two professional references or non-relatives)

Name	Phone	Best Time to Call