The Well of DeSoto
Volunteer Sign-Up Application
Support flows and families grow at the well.

Section 1 – Personal Information
Full Name: _____
Date of Birth: ____ / ____ / _____
Address: _____
City: _____ State _____ Zip _____
Phone Number: (____) ____-_____
Email Address: _____
Emergency Contact Name: _____
Relationship: _____
Emergency Contact Phone: (____) ____-_____

Section 2 – Volunteer Interests
☐ Family Support Programs
☐ Food Distribution / Pantry Support
☐ Transportation Assistance
☐ Youth & Mentorship Programs
☐ Community Outreach / Events
☐ Administrative / Office Support
☐ Facility Maintenance / Setup
☐ Other (please specify): _____

Section 3 – Availability
Check all that apply:

Day	Morning	Afternoon	Evening
Monday	☐	☐	☐
Tuesday	☐	☐	☐
Wednesday	☐	☐	☐
Thursday	☐	☐	☐
Friday	☐	☐	☐
Saturday	☐	☐	☐
Sunday	☐	☐	☐

Preferred Start Date _____ Estimated Hours per Week _____
Section 4 – Experience & Skills
Please describe any relevant experience, training, or skills (e.g., childcare, counseling, event planning, clerical work, cooking, driving):
_____
_____
_____
_____
_____
_____

Section 5 – Background & Agreement
Have you ever been convicted of a crime? □ Yes □ No
If yes, please explain briefly: _____

Statement of Understanding
I understand that submitting this application does not guarantee placement as a volunteer.
I agree to abide by the mission and values of The Well of DeSoto, and to uphold confidentiality and professional conduct in all volunteer activities.
Signature: _____ Date: _____
For Office Use Only

Date Received	_____
Interview Date	_____
Approved By	_____
Orientation Date	_____
Assigned Program	_____