



"In here there are no strangers..."

Sisters Of The Road

...just friends we've never met."

VOLUNTEER APPLICATION

Name _____ Phone _____

Address _____ City _____ State _____ Zip _____

E-mail _____ Birth Date (optional) _____

Emergency Contact _____ Emergency # _____

Check all that interest you...

<input type="checkbox"/>	Cafe	<input type="checkbox"/>	Office Support	<input type="checkbox"/>	SisterSpeak
<input type="checkbox"/>	Food Crew – vehicle	<input type="checkbox"/>	Community Organizing: Leadership Development	<input type="checkbox"/>	Big Event (auction, awards ceremony, etc)
<input type="checkbox"/>	Workforce Development	<input type="checkbox"/>	Health Care Advocacy & Research	<input type="checkbox"/>	

Skills I have that I might want to share with Sisters. Please describe.

<input type="checkbox"/>	Art/Music	
<input type="checkbox"/>	Basic Office / Data Entry	
<input type="checkbox"/>	Board of Directors	
<input type="checkbox"/>	Canvassing / Phoning	
<input type="checkbox"/>	Community Organizing	
<input type="checkbox"/>	Computer Skills	
<input type="checkbox"/>	Database Management	
<input type="checkbox"/>	Event Planning	
<input type="checkbox"/>	Finance / Budget	
<input type="checkbox"/>	Foreign Language speak	
<input type="checkbox"/>	Graphic Design	
<input type="checkbox"/>	Meeting Facilitation	
<input type="checkbox"/>	Decoration	
<input type="checkbox"/>	Organizational Development	
<input type="checkbox"/>	Photography	
<input type="checkbox"/>	Public Speaking	
<input type="checkbox"/>	Restaurant	
<input type="checkbox"/>	Web Design / Maintenance	
<input type="checkbox"/>	Other	

_____ **Check here to receive Action Info email updates from Sisters' Systemic Change Team**

Have you volunteered with other organizations? Please write them down...

What motivates me to volunteer? I want to volunteer at Sisters because...

What can Sisters do for me? As a volunteer, Sisters can help me be successful by...

Mission Statement

Sisters Of The Road exists to build authentic relationships and alleviate the hunger of isolation in an atmosphere of nonviolence and gentle personalism that nurtures the whole individual, while seeking systemic solutions that reach the roots of homelessness and poverty to end them forever.

I agree to abide by and uphold the mission of Sisters Of The Road.

Signature _____ Date _____

Volunteer Confidentiality and Non-Discrimination Agreement

It is the policy of Sisters Of The Road that all information about customers and other community members involved in any way with Sisters, including volunteers, is confidential and stays within the walls of the organization. This includes, but is not limited to requests for information about the whereabouts of any particular person. We can offer to post a message on the Community Message Board, but we cannot say whether a particular person is or has been at Sisters. In addition, to protect the privacy and dignity of the people we serve, any information about a customer's life or situation will not be brought to the attention of others unless permission is given to do so.

By signing below, I acknowledge and affirm my intent to abide by this policy and protect the confidentiality of all who are involved with Sisters Of The Road.

In addition to protecting the confidentiality of the people I work with and serve, I commit to practicing the philosophies of nonviolence and gentle personalism and learning and practicing being a good ally against oppressions. An ally is a person who is not targeted by a particular oppression (ex. sexism, racism, classism, ableism) but is committed to proactively and consistently developing and using skills, knowledge and awareness to unlearn and end the violence of that oppression in their own actions and thoughts, and in the relationships and systems they work and live within.

Signature _____ Date _____