



251 W. Prospect St.  
Jackson, MI 49203  
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Phone: 517-784-6620 x 6  
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**GJHFH Volunteer Application-Please return via email, fax or mail!**

Name: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home#: \_\_\_\_\_ Cell #: \_\_\_\_\_ Work #: \_\_\_\_\_

Email: \_\_\_\_\_ Occupation: \_\_\_\_\_

DOB: \_\_\_\_\_ If under 18 we need parent/guardian initials: \_\_\_\_\_  
Month/Day/Year

Bilingual (Circle): YES or NO What Language(s)? \_\_\_\_\_

**Emergency Contact Information**

Name of person to contact in the event of an emergency: \_\_\_\_\_

Relationship to you: \_\_\_\_\_ Phone #: \_\_\_\_\_

**Medical Conditions, Medications or Special Accommodations that you would like us to make for you?** \_\_\_\_\_

**What is your preferred method of contact?**

- Via email Preferred email address: \_\_\_\_\_
- Via phone Preferred Phone Number: \_\_\_\_\_

**Would you be interested in being a part of an email database that will update you on Greater Jackson Habitat for Humanity events and activities?**

- Yes
- No

**How did you hear about Greater Jackson Habitat for Humanity and its Volunteer Program?**

\_\_\_\_\_

**Why would you like to become a volunteer at Greater Jackson Habitat for Humanity?**

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**Service Term Desired:** *(Check the applicable)*

- One-time volunteer
- Long term volunteer
- Community Service (Please Clarify):

**Preferred Start Date:**

\_\_\_\_\_

\_\_\_\_\_

**# of hours Needed:** \_\_\_\_\_ **Hours Completed by:** \_\_\_\_\_

- Other (Please Clarify): \_\_\_\_\_

**What specific areas would you like to assist in? (Please circle the areas that interest you)**

- ReStore
- Construction
- Other: \_\_\_\_\_

**What areas are you skilled in?**

**What Certificates or Degrees do you have that could help you perform the above tasks? (Optional)**

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Times			
✓ (Please Check Days & Shift Available)			
<b>Tuesday</b>	9:00 am – 12:00 pm	12:00 pm – 5:00 pm	
<b>Wednesday</b>	9:00 am – 12:00 pm	12:00 pm – 5:00 pm	
<b>Thursday</b>	9:00 am – 12:00 pm	12:00 pm – 5:00 pm	
<b>Friday</b>	9:00 am – 12:00 pm	12:00 pm – 5:00 pm	
<b>Saturday</b>	9:00 am – 12:00 pm	12:00 pm – 5:00 pm	

**Number of Hours Available to Volunteer Each Week:**

- 1-5
- 5-10
- 10-15

**Please list the day/time frames you are available to volunteer:**

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**Committee Opportunities** – Habitat for Humanity has the following standing committees. Members are selected to serve on the basis of skills, experience, education, and experience with the organization. If you are interested in making a further volunteer commitment to Habitat, please indicate on which of the following committees you would be willing to serve.

\_\_\_\_\_ Family selection and Support: nurture and support new homeowners through partnership

\_\_\_\_\_ Finance: Financial oversight of the affiliate

\_\_\_\_\_ Development: fund raising, public relations, grant writing, volunteer recruitment

\_\_\_\_\_ ReStore committee: assist with growth and development of the ReStore

\_\_\_\_\_ Faith relations

\_\_\_\_\_ Construction committee

### **Authorization Agreement & Background Information:**

1. I certify that the information provided on this volunteer application is true and complete to the best of my knowledge. I understand that any false statement, omission or misrepresentation in this application or placement interview may result in rejections of my application or discharge from the volunteer program.
2. Because the nature of our work requires us to work with at risk families and youth, GJHFH Habitat requires its Volunteers and Staff to provide authorization and consent to a standard background check process, as a matter of policy. I consent to having **Greater Jackson Habitat for Humanity** complete a criminal background check prior to volunteering.

Have you ever been convicted of a felony? (Yes/No) \_\_\_\_\_ If indicated yes, when: \_\_\_\_\_

I, \_\_\_\_\_, am requesting to volunteer at the GJHFH Habitat. I understand that I am to treat this experience like a job and be respectful of others volunteering, the organization, equipment, staff and partner families. I accept with my signature, as proof of agreement and willing compliance.

\_\_\_\_\_  
Signature of Applicant and/or Parent if younger 18

\_\_\_\_\_  
Date