Volunteer Application Form

Date: ____________________________

**Contact Information**

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Mr.</td>
<td>□ Mrs. □ Miss</td>
</tr>
<tr>
<td>□ Ms.</td>
<td>□ Dr.</td>
</tr>
</tbody>
</table>

Name

Street Address

City, State, Zip

Home Phone

Work Phone

Cellular Phone

Email Address

Date of Birth

Occupation/Place of employment

Employer has grant program for volunteer hours

□ Yes □ No

Are you retired?

□ Yes □ No

Education (level, degree, or area of study)

Current School, Grade, and/or level

Other volunteer experiences (past and/or current)

How did you learn about DCH?

Are you a DCH member?

□ Yes □ No

Would you like to receive membership information?

□ Yes □ No

Please list any physical or medical conditions or restrictions, (including allergies, medications, etc.) in case of
## Person to Notify in Case of Emergency

<table>
<thead>
<tr>
<th>Name</th>
<th>Relationship</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Street Address</td>
<td></td>
</tr>
<tr>
<td>City, State, Zip</td>
<td></td>
</tr>
<tr>
<td>Home Phone</td>
<td></td>
</tr>
<tr>
<td>Work Phone</td>
<td></td>
</tr>
<tr>
<td>Cellular Phone</td>
<td></td>
</tr>
<tr>
<td>Email Address</td>
<td></td>
</tr>
<tr>
<td>Physician Name</td>
<td></td>
</tr>
<tr>
<td>Physician Phone Number</td>
<td></td>
</tr>
</tbody>
</table>

## Availability

During which hours are you available for volunteer assignments?

- **Monday**:  
  - Morning  
  - Afternoon  
  - All day  
- **Tuesday**:  
  - Morning  
  - Afternoon  
  - All day  
- **Wednesday**:  
  - Morning  
  - Afternoon  
  - All day  
- **Thursday**:  
  - Morning  
  - Afternoon  
  - All day  
- **Friday**:  
  - Morning  
  - Afternoon  
  - All day  
- **Saturday**:  
  - Morning  
  - Afternoon  
  - All day

## Special Skills or Qualifications

Please share with us any special skills or qualifications you might have. Let us know why you would like to volunteer for DCH. Include other volunteer jobs, special interests, hobbies or previous employment.

____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________

## References

Name: ___________________________ Phone: ___________________________

Name: ___________________________ Phone: ___________________________
# Volunteer Opportunities

Please check off all areas of interest:

- ☐ Mailings (Throughout the year)  
  Weekdays  
  Fold, stuff, & stamp

- ☐ Community Garden Volunteer (Spring, Summer & Fall)  
  Weeding, mulching, general clean up

- ☐ Photograph Events/DCH Grounds (Various dates)  
  Need digital camera

- ☐ Lecture registration (January-March)  
  Evenings  
  Check-in registrants, collect payment, attend lecture for free

- ☐ Secret Garden Volunteer (every other Friday 9 to noon)  
  Work with preschool children at Ministry of Caring Daycare in classroom and children’s Community Garden

- ☐ Grounds Garden Volunteer  
  Tend gardens at TheDCH facility.

- ☐ Arbor Day Volunteer (Weekday in April)  
  Help staff with Arbor Day activity at local park; help plant trees and educate school children

- ☐ Tree Plantings (Spring & Fall)  
  Saturdays  
  Dig holes, plant, stake and water trees

- ☐ Special Events Representative (Various dates)  
  Man booth at various special events

- ☐ Rare Plant Auction Volunteer  
  Plant moving, plant set up, research

- ☐ Flyer/Brochure Distributor (Quarterly dates)  
  Distribute flyers and information around town for upcoming events, etc.

- ☐ Tree Steward  
  Serve as an advocate for trees and assist with advancement of Urban Forestry

---

Have you ever been convicted of or plead guilty to any crimes?  ☐ Yes  ☐ No

If yes, explain:

___________________________________________________________________________________________________
___________________________________________________________________________________________________
___________________________________________________________________________________________________
Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

| Name (printed) |   |
| Signature      |   |
| Date           |   |

Our Policy

It is the policy of DCH to provide equal opportunities without regard to race, color, religion, sex, age, marital status, or disability.

Thank you for completing this application and for your interest in volunteering with us.

Please return this form to: Gordon Starr  
Membership and Volunteer Manager  
The Delaware Center for Horticulture  
1810 North Dupont Street  
Wilmington, DE 19806  
302-658-6262 ext. 108  
302-658-6267 fax  
gstarr@thedch.org  
www.thedch.org

For Office Use Only

| Application Received Date |   |
| Interview Date            |   |
| Start Date                |   |
| Assignment                |   |
| Supervisor                |   |
| Notes                     |   |