## Volunteer Application Form

**Date:** __________________________

### Contact Information

<table>
<thead>
<tr>
<th>Field</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mr.</td>
<td>Mrs.</td>
</tr>
<tr>
<td>Ms.</td>
<td>Dr.</td>
</tr>
<tr>
<td>Name</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>Date of Birth</td>
<td></td>
</tr>
<tr>
<td>Occupation/Place of employment</td>
<td></td>
</tr>
<tr>
<td>Employer has grant program for volunteer hours</td>
<td></td>
</tr>
<tr>
<td>Are you retired?</td>
<td></td>
</tr>
<tr>
<td>Education (level, degree, or area of study)</td>
<td></td>
</tr>
<tr>
<td>Current School, Grade, and/or level</td>
<td></td>
</tr>
<tr>
<td>Other volunteer experiences (past and/or current)</td>
<td></td>
</tr>
<tr>
<td>How did you learn about DCH?</td>
<td></td>
</tr>
<tr>
<td>Are you a DCH member?</td>
<td></td>
</tr>
<tr>
<td>Would you like to receive membership information?</td>
<td></td>
</tr>
<tr>
<td>Please list any physical or medical conditions or restrictions, (including allergies, medications, etc.) in case of emergency.</td>
<td></td>
</tr>
</tbody>
</table>
### Person to Notify in Case of Emergency

<table>
<thead>
<tr>
<th>Name</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Relationship</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

<table>
<thead>
<tr>
<th>Name: ___________________________</th>
<th>Phone: ___________________________</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name: ___________________________</td>
<td>Phone: ___________________________</td>
</tr>
<tr>
<td>Name: ___________________________</td>
<td>Phone: ___________________________</td>
</tr>
</tbody>
</table>
**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 (Wednesdays, 9 am to noon)**
  - 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

- **Bare Root Tree Plantings (March & November)**
  - Saturdays
  - Dig holes, plant, stake and water trees

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

- **Rare Plant Auction Volunteer (last Saturday in April)**
  - Cashier, plant moving, plant set up, research, plant preparation

- **Flyer/Brochure Distributor (Various date)**
  - 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

- **Writer/Blogger**
  - Writing about TheDCH activities, events, and people.

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: Marcia Stephenson 
Volunteer Coordinator 
The Delaware Center for Horticulture 
1810 North Dupont Street 
Wilmington, DE 19806 
302-658-6262 ext. 105 
302-658-6267 fax 
mstephenson@thedch.org 
www.thedch.org

For Office Use Only

Application Received Date 
Interview Date 
Start Date 
Assignment 
Supervisor 
Notes