



# Volunteer Questionnaire

*\*\*In order to update our records, we ask that you complete the following brief questionnaire.*

Name \_\_\_\_\_ Date started volunteering \_\_\_\_\_

### Age group

- Under 15       16 to 18       19 to 25       26 to 40
- 41 to 55       56 to 59       60 to 64       65 to 74       75 or older

**Gender**    M    F

### Contact Information

Phone \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

Preferred method of contact:    phone    email    mail

### Background

- Highest Education     public school             high school – graduated    Yes    No
- College, program \_\_\_\_\_ graduated    Yes    No
- University, program \_\_\_\_\_ graduated    Yes    No
- Professional Degree \_\_\_\_\_ completed    Yes    No
- other \_\_\_\_\_

Please list any relevant courses or experiences that will assist you in working at Danielle’s Place.

\_\_\_\_\_

- Current volunteer positions:**     cooking for events     maintenance     reception/phone     data entry
- library             fundraising     website     public speaking
- board of directors     marketing or graphics             office support
- driving, moving furniture     other \_\_\_\_\_

- Availability - Time of day**     Mornings     Afternoons     Evenings     as needed
- Day of week**     Mon     Tues.     Wed.     Thurs.     Fri.     Sat.     Sun.     all
- Season**     Spring     Summer     Fall     Winter     as needed

How did you hear about Danielle’s Place?    newspaper     physician’s office     website     other \_\_\_\_\_

Do you have any experiences with or knowledge about eating disorders?

- family member with an eating disorder             current             recovered
- friend with an eating disorder                             current             recovered
- I have recovered from an eating disorder
- other \_\_\_\_\_             I DO NOT have any prior experience

### Skills

Do you have any special skills that you would like to share? \_\_\_\_\_

\_\_\_\_\_

Thank you for completing this questionnaire and for continuing to volunteer at Danielle’s Place.

Your support is vital and greatly appreciated.

*Please return this form to reception.*