

PERC Volunteer Application
108 36th Street, Union City, NJ 07087 (office)
111 37th Street, Union City, NJ 07087 (soup kitchen, food pantry, shelter)
Phone (201) 348-8150 ~ info@percshelter.org

Name: _____ Date: _____

Address: _____ Phone: _____

City/State: _____ Zip Code: _____

E-mail address: _____

Note: PERC will add your information to our mailing list.

How did you learn about PERC's volunteer opportunities?

Are you 18 years of age or older? ___ Yes ___ No

If you answered "no", please advise your age _____
(Volunteers under 18 years of age must have a parent/guardian complete and sign a consent form).

Are you representing a larger group? ___ Yes ___ No

If "yes", what is the name of your group, school or organization?

How did you hear about PERC's volunteer opportunities? _____

Preferred Volunteer Area (check all that apply):

- ___ **Soup Kitchen** – food preparation, serving and cleaning (volunteers needed nightly 5pm-7pm)
- ___ **Food Pantry** – packing, distributing groceries (Wednesdays 11am-2pm)
- ___ **Kids Homework Club** (after school hours – background check required)
- ___ **Kids Summer Program** (6 weeks in summer – background check required)
- ___ **Fundraising** – coordinating and assisting
- ___ **Office Assistance**
- ___ **Grant Writing**

Are you currently employed? ___ Full time ___ Part time ___ Self-employed
 ___ Student ___ Retired ___ Unemployed

Current employer (if applicable) _____

Location (city, state) _____

Please indicate any skills, talents or training you have that might be useful:

Languages you speak other than English (and please advise if you can read or write in other languages):

Have you ever volunteered elsewhere? I yes, please explain _____

Times available for volunteering (*example: Mondays afer 3pm; Saturdays and Sundays all day*)

****Emergency Contact Information (REQUIRED – all applicants must provide this information)****

Name of emergency contact: _____

Relationship to you: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone number: _____

Liability Disclaimer: By submitting this application, I confirm that all of the above information is correct. I hereby agree to hold harmless and indemnify PERC from any and all claims, suits, causes of action and liability arising out of any claims, suits or causes of actions of any kind. I realize that PERC will not be held responsible for any accident or injury that may occur while I am a volunteer. I understand that I will receive no compensation of any kind for services performed. I certify that I am over 18 and in good health, able to participate in the selected volunteer activities, and competent to enter this release.

(Volunteers working with minors must complete additional paperwork; volunteers under 18 years of age must have a parent or primary caregiver complete and sign a consent form – please request form from PERC).

I have read the above liability disclaimer and agree: Yes No

Confidentiality disclaimer: I agree and maintain the confidentiality of all client information to me through my position and uphold a professional relationship with all PERC staff and residents while I am a volunteer with this organization.

I have read and accept the above confidentiality disclaimer: Yes No

Applicant signature _____ **Date:** _____

Received by PERC Representative (signature): _____