

#### **Basic Information**

Agency Name		
Project Name		
Skills & Abilities Needed	Advocacy Board Service Clerical Court Mandated Education Finance Food Prep In-Kind	Legal Marketing Medical No special skills or N/A Physical Labor Skilled Labor Social Technology
Project Day of Week and Date (ex: Friday, Sep. XX, 20XX)		
Registration Close Date	August 21, 2018	
Project Start and End Time (ex: 9:30am-1:00pm)		
Duration (in hours)		

#### **Location & Contact Info**

Project Location	
Project Location Street, City & Zip Code	
Primary Contact for project	
Name	



Email	
Phone	
Volunteers	
What is the <b>minimum</b>	
number of volunteers you	
will accept for this project?	
Preferably 6 or greater.	
(Minimum needed for this	
project to be successful?)	
What is the maximum	
number of volunteers you	
will accept for this project?	
Allow Team Registration?	Yes
Re children (under 18 years	
of age) able to work on this	Yes No
project?	
Minimum Volunteer Age?	
ADA accessible?	
Will water or drinks be	
provided for volunteers?	
If Yes, please describe.	
Will lunch or snacks be	
provided for volunteers?	
If Yes, please describe.	

### **Supplemental Questions**



Т			
Please enter the number of			
individuals (clients, users,			
recipients, etc.) who will			
benefit from this project.			
(Enter number only)			
Do you have any special			
requirements of the			
volunteers? (EX: able to lift,			
stand for long period, work			
with public)			
What type of clothing	Professional		
should volunteers wear for	Casual		
the project?	Grubby		
	Closed toe shoes		
	Other		
Suggested personal items			
to bring (Water bottle,			
sunglasses, hat, sunscreen,			
lunch, etc.)			
Please designate your	Animal Rights/Causes	Event/Party/Carnival	Mentoring (career development/adult)
project's category. If you	Assembly	Food Pantry/Kitchen/Meals	Painting/Renovations
don't find exact match,	Building/Construction	Gardening/Planting	Park Clean Up
please pick nearest match.	Consulting	Gift/Food/Product/Clothing Drive	Presentations/Workshops
	Distribution	Health/Wellness	Science Fairs
	Environmental/Habitat Restoration	Mentoring (youth)	Walk/Run/Race
	Education/Tutoring/Reading		
It helps to share stories and			
overall impact with			
participants to provide			
insight in how volunteering			
makes an impact. Please			
write a brief (1-2			
sentences) on how this			



project will impact your	
organization or clients.	
Please use this field to	
provide any unique project	
information not previously	
included that you feel is	
important. (EX: specific	
navigation, no restrooms,	
tight security, etc.)	

### **Project Description**

Short Description (max 150 characters)	
Project Description – A detailed description of this particular project. Volunteers will read your description as they register for this event.	