

**Opportunity Information FormGeneral Information for Opportunities**

1. **Title of opportunity:**

1. **Please describe this volunteer opportunity (using complete sentences):**

1. **Agency and contact associated with this opportunity:**

1. **This is a(n):**

One-time opportunity

* What is the date?
* How many volunteers are needed total?
* How many hours are the volunteers expected to work?
* Please describe when the shift(s) would start and end.
* How many volunteers are needed for each shift (if applicable)?

Ongoing opportunity

* How many volunteers are needed total?
* How many hours is (are) the volunteer(s) expected to work?
* Please describe when the shift(s) would start and end.
* Will this opportunity take place daily, weekly, monthly, etc.?
* Is there an expiration date for this opportunity?

1. **Will you allow for team registration?**

1. **What is the minimum age requirement for this opportunity (if applicable)?**

1. **What is the maximum age requirement for this opportunity (if applicable)?**

1. **Is this opportunity family friendly?**

1. **Is this opportunity outdoors?**

1. **Is this opportunity wheelchair accessible?**

1. **Are there any other important details regarding this opportunity (i.e. “Snacks will be provided”, “Training will take place prior to each shift”, “Wear close-toed shoes”, etc.?**

1. **Where is this opportunity taking place?**

1. **Interests/Abilities (your selection will be used to match volunteers with opportunities that interest them):**

|  |  |
| --- | --- |
| Advocacy | Marketing |
| Board Service | Medical |
| Clerical | Nonprofit Professional |
| Court Mandated | Physical Labor |
| Education | Skilled Labor |
| Finance | Social |
| Food Prep | Technology |
| In-Kind | Other (please specify): |
| Legal |

1. **With which group(s) would the volunteer(s) work?**

|  |  |
| --- | --- |
| Infants / Preschoolers (0-4) | Children (5-12) |
| Adolescents (13-17) | Young Adults (18-25) |
| Adults (26-54) | Older Adults (55+) |
| Abused / Battered | Disabled |
| Disaster Victims | Families / Parents |
| Gov’t Aid Recipients | Homeless |
| Law Offenders | Low-income / Poverty |
| Men | Military |
| Women | Minorities |
| Students | Religious Groups |

1. **Additional comments:**

**Please complete this form and return to information@vccv.org**