Sample Volunteer Interview Form

Name:_______________________________________________________________________________

Address: _____________________________________________________________________________

City: ____________________________ State:_________ Zip: ______________________

Phone: (H)_________________________________ (W)____________________________________

SKILLS AND INTERESTS

Education Background: ________________________________________________________________

Current Occupation: __________________________________________________________________

Hobbies, Interests, Skills: _______________________________________________________________

Is there a particular type of volunteer work in which you are interested?  (Check all that apply)
   Technical (Scenery, Lighting, Sound)  Promotion (Public Speaking, writing)
   Administrative  Box Office
   No Preference  Other:_____________________

Is there a person or group you particularly want to work with?  (Check all that apply)
   Adults  Seniors  Teens  Children
   Disabled  No Preference  Other:_______________________

AVAILABILITY

At what times are you interested in volunteering?
   Am flexible  Weekdays  Weekends  Days  Evenings

There are times during a week that I cannot do volunteer work_______________________________

Do you have a geographic preference as to where you do volunteer work?
   No   Yes________________

Do you have access to an automobile you can use for volunteer work?
   No   Yes   Occasionally

REFERENCES

How did you hear about us?     Advertisement     Referred by friend/volunteer
   Other______________________________

From the Missouri Association of Community Arts Agencies
Filebox Organizational Development Manual and Legal & Financial Primer