Ronald McDonald House Charities Upper Midwest Volunteer Application

818 Fulton St SE Minneapolis, MN 55414 612-767-2794 www.rmhtwincities.org

Please fill out the following application and e-mail it back Shelle Baker at sbaker@rmhtwincities.org

Name Street Address City, ST, ZIP Code Home Phone Cell Phone E-Mail Address

Highest Level of Education:
Are you currently a student? If yes, Name of school
Are you required to do service for school,

Availability

Sunday

internship or work?
of hours required:

Education

Some volunteer positions require a weekly commitment while others have a more flexible commitment. Please check the days/times you are available to volunteer:

Monday	10-1 pm	1-3 pm	3-5 pm	5-8 pm
Tuesday	10-1 pm	1-3 pm	3-5 pm	5-8 pm
Wednesday	10-1 pm	1-3 pm	3-5 pm	5-8 pm
Thursday	10-1 pm	1-3 pm	3-5 pm	5-8 pm
Friday	10-1 pm	1-3 pm	3-5 pm	5-8 pm
Saturday	10am - 1 _I	om		

10am - 1 pm

	Preferred Location		
	 □ RMH Oak Street – 818 Fulton Street □ RMH inside Children's Hospital Min □ Family Room inside Children's Hos □ Family Room inside Gillette Special 	neapolis – 2525 Chica pital St. Paul – 345 Sn	nith Avenue N, St. Paul
In	terests		
Те	ll us in which areas you are interested in	volunteering.	
VC	LUNTEER ASSIGNMENTS		
Но	use Warming (All locations)		
Scl	nool Aide (Oak) Sept - May		
Scl	nool Lunch/Recess (Oak) Sept - May		
Ad	ministrative Volunteer (Oak)		
Re	ception (Children's Locations)		
Ма	intenance/Handyperson (Oak)		
Vo	unteer Driver (Oak)		
Sp	ecial Event Volunteer		
De	ep Cleaning Volunteer (Oak)		
_	D () (O) !!		
Ro	om Refresher (Children's Locations)		
	ecial Skills or Qualifications		
Sp At int no	ecial Skills or Qualifications the RMHC, we believe that every individe erests might you be capable of sharing to	o help support our mis	d valuable skill set. What talents, abilities, or ssion? We may be able to use these skills . Please check any skills you may want to
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Previous Life Experiences
Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities. Please include hobbies, language, sports, etc.
Previous Volunteer Experience
Summarize any previous volunteer experience you have had.
* Why do you want to volunteer at the Ronald McDonald House?

<u>related to you</u> and who know neighbors, friends, roommates,	your suitability for the position for which you are applying such as co-workers, etc.
Name	
Street Address	
City ST ZIP Code	
Relationship	
Phone Number	
E-Mail Address	
Personal or Professiona	al References #2
Name	
Street Address	
City ST ZIP Code	
Relationship	
Phone Number	
E-Mail Address	
How did you hear abou	t us?
How did you learn about the Ronald McDonald House?	

Please type in complete names and addresses for your references. References should be people who are not

Agreement and Signature

Personal or Professional References #1

I understand the importance of this volunteer commitment and have answered the application question honestly and to the best of my knowledge. I give the Ronald McDonald House permission to check the references I have listed. I intend to volunteer for a minimum of 6 months.

Name (printed)	
Signature	
Date	

THANK YOU!

Thank you for completing this application form and for your interest in volunteering with us.