



Community
F O O D
B A N K

VOLUNTEER INFORMATION FORM

Thank you for your interest in helping Community Food Bank. We couldn't do our work without your help!

Today's Date: _____ How did you learn about us? _____

Name: _____ Date of Birth: _____

Address: _____ City, Zip: _____

Home Phone: _____ Cell Phone: _____ E-Mail: _____

Name of Emergency Contact: _____ Phone Number: _____

Relation of Emergency Contact: _____

Have you volunteered at Community Food Bank before? **Yes / No** (Please Circle One)

When? _____ If you are a student, your school: _____

Do you have any physical limitations or personal health concerns that might impact your work as a volunteer (such as allergies, chronic illness)? _____

Are you taking medication? **Yes / No** (Please Circle One) Yes,? Please List: _____

Please list any skills and previous volunteer experience: _____

Do you speak or write languages other than English? If yes, which language(s)? _____

I am interested in working in the following areas (Mark "X" next to all that apply): General Warehouse _____

General Office (clerical/data entry) _____ Food Drives/ Special Events/ Fundraising _____

Equipment / Warehouse Maintenance _____ Assist at food distribution site _____

Availability for volunteer work: (check all that apply)

Weekday(s) _____ Weekend(s) _____ Morning(s) _____ Afternoon(s) _____

VOLUNTEER CONSENT FORM



I understand that volunteerism at Community Food Bank may sometimes mean working in warehouse conditions and can sometimes include but is not limited to lifting, working around heavy moving equipment and handling damaged food products. I hereby accept and assume full responsibility for any injury I might suffer while volunteering at Community Food Bank. Minor volunteers are expected to follow safety rules and all other rules related to the warehouse. In the event of an injury parents/guardian authorizes Community Food Bank staff to seek treatment for minor volunteers (volunteers under the age of 18) and to take other action should a medical emergency arise. I waive and release my right for damages.

Parental Permission: Community Food Bank will take all precautions to provide and maintain a safe environment for its volunteers. Minor volunteer are expected to follow safety rules and all other rules related to the warehouse. Community Food Bank accepts no liability for minor volunteers who leave Community Food Bank property without parental or guardian consent.

Auto Insurance: I shall not operate a personal vehicle for volunteer activities unless I have at least the minimum amount of liability insurance required by California law.

Photo Release: I hereby give Community Food Bank permission to copyright, use, reuse, publish, and/or republish pictures or images of me for the purpose of illustration, advertising, and promoting Community Food Bank through any medium. Community Food Bank has the right to change or alter this material.

I acknowledge having read and understood the above consent form on this _____ day of _____, 200__

Volunteer's Signature

Parental / Guardian's Signature (for volunteers under 18 yrs old)

**Please Print
In Case of Emergency, Contact:**

Name

Relationship

Address, City, Zip Code

Phone Number

Cell / Secondary Phone Number

COMMUNITY FOOD BANK

Volunteer Policies

HOURS & SCHEDULING:

Warehouse and Office volunteer shifts are from 7am–2:30 pm Monday through Friday. Volunteers may work anytime during those hours, depending on their schedule.

We prefer that volunteers call ahead to be placed on the schedule. All volunteers must sign in and out on the volunteer sign-in sheet, located at the front counter in the office

Trainees and Court referred volunteers:

Clock in using time cards, this will be proof of your hours worked. If you don't clock in and out you won't get credit for that day.

AGE OF VOLUNTEERS:

Volunteers 16 years and older may sign up to work during our normal hours of operation. Volunteers under the age of 16 are welcome to volunteer on Saturdays when heavy equipment use is limited.

LATENESS, ABSENCES AND PERSONAL CALLS

If you are late or unable to be at the warehouse at your scheduled time or if you need to modify your schedule during the week please call your department manager and let them know. If you need to leave early because of illness or an emergency, please advise staff before you leave.

Personal calls must be limited to emergencies, childcare and transportation issues. Please ask your department manager or someone at the office and you will be directed to a phone that is available during your break.

HANDLING OF FOOD BANK PRODUCTS:

Food and other products at Community Food Bank are donated for distribution to non-profit agencies serving the hungry. **The first time a volunteer is seen taking any Community Food Bank products without the consent of their supervisor, the volunteer will be dismissed. Shoplifting is a crime and you will be prosecuted to the full extent of the law.**

Food is to be consumed in the break room only.

ALCOHOL AND DRUGS:

Community Food Bank is a drug and alcohol-free workplace. A volunteer will be terminated immediately if they distribute, possess or are under the influence of any drug or alcohol while at Community Food Bank.

I understand that my service at the Food Bank is entirely voluntary. I am freely donating any work or service I perform, and I do not expect any compensation in return. I understand that I am not considered an employee of Community Food Bank and therefore I am not covered by Worker's Compensation or any other policy pertaining to Community Food Bank Employees. I understand Community Food Bank has the right to terminate service of any volunteer who violates any of the above policies, or whose work is found to be unacceptable by their assigned supervisor.

Signature

Date