



# Meals on Wheels Collin County Volunteer Application

## Applicant Information

Full Name: \_\_\_\_\_ Nickname: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Phone: \_\_\_\_\_ Alt. Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Place of employment: \_\_\_\_\_

Are you volunteering on behalf of a specific Organization / Church / Company? \_\_\_\_\_

Name of organization: \_\_\_\_\_

Language(s) spoken other than English \_\_\_\_\_

Why are you interested in volunteering with us? \_\_\_\_\_

Are you a veteran? Yes  No

Are you a current Meals on Wheels donor? Yes  No

## Volunteer Interest

Availability: Monday  Tuesday  Wednesday  Thursday  Friday

How many hours do you plan to volunteer a week/ month? \_\_\_\_\_

**MOW Meal Delivery Driver**

Areas available for route delivery: McKinney  Plano  Frisco  Wylie  Other areas

**Kitchen Volunteer Opportunity:** Assisting with assembling meals

**Special Events / Projects:** Golf Tournament  Delivering Fall Harvest/ Spring Boxes to Clients

Conducting Drives for In-Kind Donations  Secret Santa

**In Case of Emergency Contact**

Please list an individual we may contact in the event of an emergency.

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_ Alt. Phone: \_\_\_\_\_

Have you ever been convicted of a crime? \_\_\_\_\_

If yes, please disclose the nature and date of the offense. \_\_\_\_\_

*I certify my answers are true and complete to the best of my knowledge.*

*I also authorize the Meals on Wheels of Collin County to conduct a background check and to verify this information.*

*Participants may be photographed for educational, archival, and public relations purposes for The Meals on Wheels of Collin County.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_