



Irondequoit Community Cupboard, Inc.
PO Box 17834
Rochester, NY 14617
(585)336-9107

VOLUNTEER APPLICATION

(please print)

NAME: _____

ADDRESS: _____

EMAIL: _____

PHONE: _____

EMERGENCY CONTACT:

NAME: _____ Phone: _____

FOR STUDENTS (must be at LEAST a Junior in high school):

NAME OF SCHOOL ATTENDING: _____ GRADE: _____

PARENT (GUARDIAN) NAME, IF DIFFERENT FROM EMERGENCY CONTACT:

NAME: _____ Phone: _____

I AM INTERESTED IN:

Tuesdays _____ Saturdays _____ Hours are 8:45am to 11:00am

_____ PICKING-UP DONATIONS FROM OTHER LOCATIONS

_____ STOCKING & SORTING FOOD _____ PICKING-UP/DELIVERY FOR BACKPACK PROGRAM

_____ grant writing and support

_____ CLEANING AND/OR MAINTENANCE _____ LIAISON TO YOUR CHURCH, SCHOOL OR CIVIC ORGANIZATION

CONFIDENTIALITY AGREEMENT

Irondequoit Community Cupboard staff, interns and volunteers will to the best of their ability, ensure confidentiality and privacy about history, records, and discussions about the people they serve. Staff, interns, and volunteers will not disclose any information about a person, including the fact that the person is or is not served by the organization to anyone outside of this organization unless authorized by the Executive Director. All records will also remain confidential and will not be released to anyone without a signed release from the client.

The principle of confidentiality must be maintained in all programs, departments, functions and activities of the Irondequoit Community Cupboard.

I have read and understand that all client files and information regarding clients is confidential and agree to adhere to this policy.

Employee/Volunteer Signature

Date