

Rockingham County Request-for-Volunteer Application

On-Going Needs

Please print

Agency Name.....Contact Name

AddressCity/State/Zip.....

Telephonee-mail.....

Describe Volunteer Need (Use separate form for each job description):

Special Skills Request:

1.
2.
3.
-

Volunteer time needs: (Circle all applicable)

Number of Days per week: 1 2 3 4 5 6 7

Monday Tuesday Wednesday Thursday Friday Saturday Sunday No Preference

Other pertinent information:

I understand that the Rockingham County Volunteer Center will use this information to help match volunteers with local needs. Further information may be needed by matching organizations. Rockingham County Volunteer Center is not responsible for the accuracy of any information submitted by volunteers.

Signature/Date:.....

Please attach job description if available.

Return to: Rockingham County Cooperative Extension Volunteer Center
525 Hwy 65, Suite 200
Reidsville, NC 27320 or brenda_sutton@ncsu.edu