



Volunteer Application

PO Box 1517
787 NW Liberty Lane
Poulsbo, WA 98370

(360) 779-4191
www.nkfishline.org
Volunteer@nkfishline.org

Thank you for your interest in volunteering with North Kitsap Fishline! This application is a fillable form that you can download, fill out, and email to volunteer@nkfishline.org. For details about group volunteering, community service, or youth volunteering opportunities, please visit our website or contact our Volunteer Manager.

North Kitsap Fishline is a non-profit organization, whose purpose is to provide supportive services to residents in Poulsbo, Keyport and Suquamish. Any client, volunteer, employee, or vendor shall not be discriminated against because of race, color, creed, national origin, age, sexual orientation or mental or physical disability.

Date: _____ Name: _____ Phone: _____ Email: _____

Address: _____ City: _____ Zip: _____

Birthdate: (month/day only) _____ Are you over 18? Y N If no, please list age _____

May we add you to our newsletter list? Y N Do you use any of Fishline's services? Y N

How did you hear of Fishline? Friend Internet Banner Other _____

What skills, education, languages, and any other experience do you have that might help Fishline?

Grocery Warehouse operations Retail Facilities maintenance Communications/marketing

Fundraising/grant writing Data entry Software (e.g., Word, Excel, Publisher): _____

Languages (e.g., Spanish, ASL): _____ Other: _____

Please check any of the following that apply to you:

I'm a student needing hours (Honor's Society, Scouts, etc.). If so, list hours needed and deadline: _____

I'm in a diversion program. If so, list hours needed and deadline: _____

I have court-ordered community service. If so, list hours needed and deadline: _____

Please check the days you are available, and how often you can volunteer:

Days available: M T W Th F S

Once a week Twice or more a week Special events only Date available to start: _____

Please check area(s) of interest below. Detailed volunteer position descriptions are available on our website at www.nkfishline.org.

In our Food Market (Bank)

Grocery sorter/stocker Grocery check-out clerk Pick-up/delivery driver On-site garden

Second Season Thrift Stores (our resale boutiques)

Donation pricer/sorter Cashier Driver

Second Season Home Store (our furniture store)

Furniture pick-up/delivery Cashier Back room volunteer

Out and about...

Special events Other (please list your ideas) _____

In our office

Reception Data entry Other (please list) _____

Please provide one professional or volunteer reference:

Reference Name/Organization: _____ Phone _____

Emergency contact: _____ Phone: _____ Relationship: _____

Do you have any health conditions we need to know in case of emergency: Y N If yes, please describe.
This information is confidential. _____

Please read the following and provide your signature by typing your name in the box below:

- I understand this is a volunteer position, and I will not be paid for my services.
- I will fully support the Mission and adhere to the policies of North Kitsap Fishline.
- I agree to a Washington State Patrol driving record check if I am driving.
- I consent to a background check, if required.

Please sign below. If under 18, add name of parent or guardian.

	Email your application to volunteer@nkfishline.org
--	---

For staff use only: Initial contact: _____ Notes: _____

Orientation date: _____