



# Volunteer Application

1. First and Last Name: \_\_\_\_\_
  
2. Phone Number(s):       M) \_\_\_\_\_  
  H) \_\_\_\_\_
  
3. Email Address: \_\_\_\_\_
  
4. Home Address: \_\_\_\_\_
  
5. Emergency Contact:       Name: \_\_\_\_\_  
  Phone: \_\_\_\_\_
  
6. Do you speak Spanish?    Yes      No
  
7. Any other languages? \_\_\_\_\_
  
8. How did you hear about Deep Well?
  
9. Please describe any applicable skills or volunteer experience you have.
  
10. Do you volunteer at any other local non-profits? If yes, please list which ones.

11. What interests you in volunteering at Deep Well?

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12. What is your availability? (Check all that apply)

	Monday	Tuesday	Wednesday	Thursday	Friday
AM (9-1)					
PM (1-5)					
Evening (5:30-8:30)					

13. Please select the areas that you would like to volunteer with.

- Office Worker
- Food Pantry
- Livable Housing (Home Repairs)
- Translator
- On Call
- One-Time
- Holidays
- Circles Ally (“Mentor”)
- Circles Resource Team

If you are interested in volunteering at Deep Well and/or Circles, please complete and return this form to:

**Hilton Head Island Deep Well Project**

Physical Address:  
80 Capital Drive  
Hilton Head Island, SC 29926

Mailing Address:  
P.O. Box 5543  
Hilton Head Island, SC 29938

Lori Alexander, Volunteer Coordinator  
E) [Volunteer@deepwellproject.org](mailto:Volunteer@deepwellproject.org)  
W) 843-785-2849