

# Goodwill

Industries of Southwest Florida, Inc.



Building lives,  
families, and  
communities—  
One job at a time.

## Volunteer Application



4940 Bayline Drive - North Fort Myers FL 33917  
(239) 995-2106, Extension 249 - (239) 995-5868 Fax  
[www.goodwillswfl.org](http://www.goodwillswfl.org)

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Dear Volunteer:

Thank you for your interest in supporting Goodwill Industries of Southwest Florida. It would not be possible to accomplish our community's needs without the support of our volunteers.

Please fill out the pages that follow and return the originals to our Administrative offices for processing. If you have any questions please feel free to contact me. We would like to set a day for you to come in and join us for a Breakfast with the President – a one hour, informal get together that educates you on Goodwill, our mission, and our programs and services. Once we receive your application, I will contact you to set a date.

For over a Century, Goodwill Industries has been helping individuals with disabilities and other disadvantages with the philosophy of a "hand up, not a hand out." Dr. Edgar J. Helms, our founder, describes Goodwill as "An industrial program as well as a social service enterprise...a provider of employment, training and rehabilitation for people of limited employability, and a source of temporary assistance for individuals whose resources were depleted."

Dr. Helms' vision set an early course for what today has become an internationally known organization helping to enhance the dignity and quality of life of individuals, families and communities through the power of work!

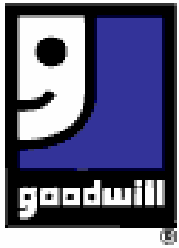
Sincerely,

*Natalie Stratta*

Volunteer Coordinator

[nataliestratta@goodwillswfl.org](mailto:nataliestratta@goodwillswfl.org)

Phone: (239) 995-2106, Ext 249



# Volunteer Application

Please Print

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

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Apt or Suite #: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone \_\_\_\_\_

E-mail Address: \_\_\_\_\_

## Demographic Information:

Are you over 16 years of age \_\_\_\_\_ Valid Driver's License? \_\_\_\_\_

If under 16 – Guardian name: \_\_\_\_\_ Phone \_\_\_\_\_

## Special needs:

Pursuant to the America for Disabilities Act, Do you require special aides or services? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, please explain: \_\_\_\_\_

## Name of person to contact in case of an emergency:

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

Telephone Numbers to call: Day: \_\_\_\_\_ Evening: \_\_\_\_\_

How did you hear about our volunteer program? Please check which one applies:

\_\_\_ Goodwill \_\_\_ News-Press \_\_\_ Volunteer website \_\_\_ Friend \_\_\_ Social media \_\_\_

Other: \_\_\_\_\_

## References:

Please include someone you have known you for more than two years (non-relative) who we can call.

Name1: \_\_\_\_\_ Relationship: \_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_\_

## Information about your interests/skills/experience

Please describe any specific interests/events you have: \_\_\_\_\_

Would you prefer to volunteer: \_\_\_ Retail store \_\_\_ Shipping Dept \_\_\_ Events \_\_\_ ALL

Other: \_\_\_\_\_ Career Service Dept (Assist with resumes & job search)

\_\_\_ Communications/PR/Marketing

Please list any experience/skills you have relative to your interests:

\_\_\_\_\_

**Availability:** Please circle the best times you would be available to volunteer:

*Mornings:*    Monday    Tuesday    Wednesday    Thursday    Friday    Saturday    Sunday

*Afternoons:*    Monday    Tuesday    Wednesday    Thursday    Friday    Saturday    Sunday

*Evenings:*    Monday    Tuesday    Wednesday    Thursday    Friday    Saturday    Sunday

*Months:*    All Year    Only during the following months: \_\_\_\_\_

Counties: What county(s) are you available to serve:  Lee  Charlotte  Hendry  Collier  Glades

***Use of computers:***

I understand that I am not allowed to access any computer unless permission has been given by the IT department.

***By my signature, I further understand that:***

- I will conduct myself in accordance with Goodwill Industries code of conduct.
- I understand that a background investigation may be conducted.
- I certify that all information in this application is true and complete.
- I give any organization involved with Goodwill Industries of SWFL, Inc., permission to photograph me and use these photographs/videotapes for publicity purposes, unless written notice is received to the contrary.
- If I am hurt, I will report the accident to the HR Department at (239) 995-2106 by the end of that day.

\_\_\_\_\_  
**Applicant Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
*Guardian (if under 18 years of age)*

\_\_\_\_\_  
*Date*