



110 N. POPLAR STREET • P.O. BOX 352 • WILMINGTON, DELAWARE 19899 • (302) 656-8542 • 652-8314 • FAX 777-5502

Volunteer Application

NAME: _____ DATE: _____

ADDRESS: _____ CITY: _____ ST: _____ ZIP: _____

PHONE: (work) _____ (home) _____ (cell) _____

EMAIL: _____

AGE GOUP: ___ Under 18yrs. ___ 10-35yrs. ___ 36-50yrs. ___ Over 50

ARE YOU A REPRESENTATIVE OF: ___ Church ___ Organization

Church/Organization Name: _____

Occupation: _____

Special Training/College: _____

Interests/Hobbies: _____

Days Available: ___ MON ___ TUE ___ WED ___ THUR ___ FRI ___ SAT ___ SUN

Hours Available: _____

Which church do you attend? _____

Pastor: _____ Phone: _____

REFERENCES:

1. _____ phone _____

2. _____ phone _____

Why did you choose Sunday Breakfast Mission for volunteer work? _____

If you desire to share your personal testimony, please attach a separate sheet

VOLUNTEER OPPORTUNITIES

Please check all interests that apply to you:

CLERICAL OFFICE

- Writing/Editing
- Reception/Telephone
- Typing/Data Entry
- Mailings

SUPPORT SERVICES DEPARTMENT

- Clothing Distribution Center
- Demolition/Renovation
- Miscellaneous Repair
- Truck Drivers – CDL Licensed
- Landscaping
- Painting
- Electric
- Plumbing

PROGRAM

- Mentoring/Evangelism
- Life Skills Training
- Listening Ear/Chaplain
- Small Men's Group Bible Study
- Chapel Service
- Learning Center
- Work with Children
- Music, Piano, Vocal

FOOD SERVICE

- Backpack Give-a-way (Mid-August)
- Great Thanksgiving Banquet
- The Great Thanksgiving Food Give-a-Way
- Sort Food

Please return this form to: Kathleen Dorsey (kdorsey@sundaybreakfastmission.org)
