

HOUSE OF THRIFT, LLC

houseofthrifftllc@gmail.com
412-468-0057



VOLUNTEER APPLICATION

Name _____

Address _____

City, State, Zip _____

Home Phone _____ Cell Phone _____

Email Address _____

Are you at least 18 years of age? _____

Do you have a driver's license? No Yes

Do you have transportation to work? No Yes

How many hours are you interested in working per week? _____

Duration of past Volunteer Services:

One Time: _____ 1-3 months: _____ More than 3 months: _____

What hours for each day are you generally available?

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

Which location are you interested in volunteering? _____

INTERESTS: We use this information to try and pair you up with tasks we have available:

___ I would like to process clothing, linens, shoes, books, etc.

___ I would like to help with incoming donations

___ I would like to drive or help on truck for pickups/cleanouts

___ I am great with decorating/staging

___ I would like to work on the sales floor with customers

___ I would be a wonderful cashier

___ I have experience valuing collectibles/antiques

___ Other (specify) _____

SKILLS & EXPERIENCE

Are you presently employed? No Yes Student Retired
 If yes, to employed or student: Full Time Part Time

Employer/School Name: _____

Current Position/degree pursuing: _____

What is your highest level of completed education? _____

Please rate your skills/degree of comfort in the following areas:

	Very little		Average		Great
Technology	1	2	3	4	5
Organization	1	2	3	4	5
Teamwork	1	2	3	4	5
Handling cash	1	2	3	4	5
Basic arithmetic	1	2	3	4	5
Communication	1	2	3	4	5
Customer Service	1	2	3	4	5
Social Media/IT	1	2	3	4	5

Please indicate the extent to which you agree or disagree with the following statements:

1= Strongly disagree 2=Disagree 3=Neither agree 4=Agree 5=Strongly agree
 nor disagree

1.) I am good at problem solving, and I generally don't freeze up if something unexpected happens.

1 2 3 4 5

2.) I am very organized and have good attention to detail.

1 2 3 4 5

3.) When people give me constructive feedback, I don't take it personally.

1 2 3 4 5

4.) I have experience resolving conflicts in professional settings (work, school, volunteering, etc)

1 2 3 4 5

How did you hear about us? _____

Please describe any prior volunteer experience that may prepare you to work as a volunteer for House of Thrift, LLC (include organization names and dates of service)

Why do you want to volunteer? [Or, what do you want to gain from this volunteer experience?]

Have you ever been convicted of a crime? [If yes, please explain the nature of the crime and the date of the conviction and disposition.] Conviction of a crime is not an automatic disqualification for volunteer work.

Do you have any physical limitations or health concerns that you think we should know about (e.g., trouble standing for prolonged periods, trouble lifting, etc.)?

REFERENCES

Please list three people who know you well and can attest to your character, skills, and dependability. Include your current or last employer. No family members, please.

Name/Organization	Relationship to you	Length of relationship	Phone number

It is the policy of House of Thrift, LLC to provide equal employment opportunity (EEO) to all persons regardless of age, color, national origin, citizenship status, physical or mental disability, race, religion, creed, gender, sex, sexual orientation, gender identity and/or expression, genetic information, marital status, status with regard to public assistance, veteran status, or any other characteristic protected by federal, state or local law. In addition, House of Thrift, LLC will provide reasonable accommodations for qualified individuals with disabilities.

Please read the following carefully before signing this application:

I understand that this is an application for and not a commitment or promise of volunteer opportunity. I certify that I have and will provide information throughout the selection process, including on this application for a volunteer position and in interviews with House of Thrift, LLC that is true, correct and complete to the best of my knowledge. I certify that I have and will answer all questions to the best of my ability and that I have not and will not withhold any information that would unfavorably affect my application for a volunteer position. I understand that information contained on my application will be verified by House of Thrift, LLC. I understand that misrepresentations or omissions may be cause for my immediate rejection as an applicant for a volunteer position with House of Thrift, LLC, or my termination as a volunteer.

Signature _____ Date _____

Print _____