



300 Old Route 10, Enfield, NH 03748  
 P: (603) 448-6888  
[julia@uvhs.org](mailto:julia@uvhs.org)  
[www.uvhs.org](http://www.uvhs.org)

## Community Service Volunteer Application

### Personal Information

Name	
Date of Birth if under 18	
Mailing Address	
Email Address	
Phone Number	

***\*If under 18, please list the accompanying parent or guardian***

Name:	
Mailing Address	
Email Address	
Phone Number	

Do you have a previous relationship with UVHS? If yes, please describe:

Please tell us why you are doing community service (if court-mandated please indicate the offense), how many hours you need to fulfill & the deadline for completion of hours:

Will you require a letter confirming your completed community service? If yes, to whom should it be addressed?

Skills, talents, certifications, degrees, experience that you would like to offer:



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Do you have any special accommodations, requirements or allergies? If yes, please describe:

**Volunteer Positions**

Community service volunteers are restricted to general cleaning opportunities, such as laundry, sweeping & mopping, dishes and other small projects. These duties can be conducted any day of the week, between the hours of 9am-4pm but must be scheduled in advance with the supervisor who will be assigned to you. *Volunteers must be age 14 or older; ages 14 – 16 years must have a work permit & constant adult supervision from a parent/guardian who is also a trained volunteer.*

**Availability** *Please indicate days and times you are available to volunteer.*

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

**Emergency Contact**

Name	
Address	
Phone Number	
Email Address	
Relationship	

**Applicant's Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_