Elisha's Pantry

Volunteer Information Form

Volunteer Status:

☐ Individual   ☐ Organization, School, or Other Group   ☐ Court-Ordered Community Service

_____
(Print name of group, school/university, or organization)

Contact Name: _____   Phone #: _____

Volunteer Information:

Full Name: _____   Date of Birth: _____

Home Address: _____

City, State, Zip Code: _____

Mobile Phone: _____   Alternate Phone: _____

Email Address: _____

How did you hear about us? _____

Emergency Contact: _____

Contact Relationship: _____   Phone #: _____

Are you bilingual or multi-lingual? ☐ Yes   ☐ No

If yes, please list languages spoken: _____

Volunteer Expectations Agreement

You, as an Elisha's Pantry Volunteer, provide the power that enables us to supply 200+ families with food each week. The following are guidelines to make Elisha's Pantry a safe and pleasant place for you to volunteer.

1. If any task causes you discomfort, or if you feel it is unsafe or unhealthy to perform a specific task, report the condition to a pantry staff member immediately.
2. Wear sensible, appropriate clothing and footwear for the task(s) at hand. **Closed-toed shoes** are mandatory for all activities. **No exceptions.**
3. Wash your hands before beginning each shift, after eating, and after using the restroom.
4. Wear gloves when handling perishable food, e.g., fruits, vegetables, bread, etc.
5. Alcohol and other drugs are prohibited in the workplace.
6. No smoking in the pantry or on the CCUM campus.
7. Only authorized personnel may engage with stock on pantry shelves.
8. Report any injury or illness to the Pantry Coordinator immediately.
9. Please avoid conversations, comments, and language that are inappropriate in a professional workplace.
10. The team needs you. Please honor your scheduled commitments.
11. Harassment of any kind is strictly prohibited.
12. Masks are optional.
13. Know that you are a vital part of the organization and are helping to feed hungry families each and every shift.

As an Elisha's Pantry Volunteer, I will abide by the expectations set forth above in order to maintain a safe and pleasant work environment for all.

Acknowledgement:

_____

Signature   Date