

Volunteer Information

Thank you for your interest in volunteering with the Hunger Coalition of Otsego County.

Please fill out the form below. *This form does not commit you to any position. We will utilize all information to help find the best place for each volunteer and volunteer opportunity*

Name: _____ Phone Number: _____

Address: _____

Email: _____ Best time to contact ? _____

I am interested in helping as (Circle as many as apply):

Board member Event Support Fundraising Food/Money drives Finding more information to volunteer in my local pantry

I am interested in volunteering because: _____

Please share any talents or abilities you have that can help while working with the Hunger Coalition of Otsego County. _____

I am available (Please list the hours you may be available to volunteer. If this is directly related to work, please define your availability). _____

I am interested in working: Close to my home County-wide State-wide

Are you involved in any other volunteer groups or agencies? Y or N

If yes, please list them below: _____

If no, please list any past affiliations/groups _____

Is there anything else you would like to share with us? _____

All information will be kept private and only shared with the HCOC Board of directors and in direct relation to volunteer opportunities.