

CATHOLIC CHARITIES OF THE DIOCESE OF PITTSBURGH, INC.
VOLUNTEER APPLICATION

Thank you for your interest in the volunteering with Catholic Charities. Please fill out this application which will assist us in matching you with families in need.

Date: _____

Name: _____

Address: _____
(Street) (city) (state) (zip code)

Phone: (day) _____ (evening) _____

Church Affiliation (optional): _____

Foreign Languages Spoken: _____

Hobbies, skills, special interest/training: _____

List previous volunteer experience and community affiliations:

If presently employed, (list job title and employer)

Who to notify in an emergency?

Name: _____ Telephone No.: _____

References: (Please list two persons we may contact who are not family members.)

Name: _____

Address: _____

Telephone: _____

Name: _____

Address: _____

Telephone: _____