



P O R T L A N D
P R O M I S E
C E N T E R

1831 Baird Street Louisville, KY 40203

Volunteer Information Form

(Please Print)

Date _____ Date of Birth _____

First Name _____ Last Name _____

Street Address _____ Zip Code _____

Mailing Address _____ Zip Code _____

Home Phone # _____ Work Phone # _____

Cell Phone # _____ Fax # _____

E-mail _____

Employer _____ Job Title _____

Church _____

Clubs/Associations _____

Skills/Abilities/Certifications _____

Hobbies/Special Interests _____

How did you hear about PPC? _____

Will you refer 3 people who might be interested in PPC's vision and mission?

1. _____ 2. _____ 3. _____

Would you be willing to bring them to PPC for a tour? Yes No (please circle one)

How are you affiliated with the Portland Promise Center?

- Parent of a child/youth in program
- Youth in the program
- College Connection
- Neighborhood Resident
- Community of Faith
- Celebrate Recovery
- Other _____

Please indicate the volunteer functions you are performing with PPC and when:

PPC Program Areas of Interest (please check all that apply):

▪ **Learning Center**

- Mentoring
- Tutoring
- Coaching/Recreation: _____
- Artistic Expression: _____
- Life Skill Training: _____
- College Connection

▪ **Community of Faith**

- Childcare
- Community Service Opportunities
- Small Group Leader

▪ **Community Development**

- Small Business Mentor
- Job Training/Development
- Financial Counseling
- Tax Assistance

▪ **Adult and Family Ministries**

- Adult Education
- Celebrate Recovery
- Childcare
- Driving
- Counseling
- Medical/Healthcare

▪ **Resource Development**

- Building/Vehicle Maintenance
- Clerical
- Legal Aid
- Graphic Design
- Board/Governance

Availability (please check days and write times):

- Monday _____
- Tuesday _____
- Wednesday _____
- Thursday _____
- Friday _____
- Saturday _____
- Sunday _____

PPC Office Use Only:

Background Check Completed _____

Information Processed _____