



# The Carroll Center

FOR THE BLIND

The Carroll Center for the Blind  
770 Centre Street  
Newton, MA 02458  
(617) 969-6200

## VOLUNTEER APPLICATION

Name: \_\_\_\_\_

Address: Street #: \_\_\_\_\_ Street: \_\_\_\_\_

Town/City: \_\_\_\_\_ State: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Are you at least 16 years of age (yes/no)? \_\_\_\_\_

### VOLUNTEER INTERESTS

(please refer to the website page for details on each of these opportunities)

**\*As a reminder, we require that you commit to at least 4 months of service\***

**Please check one (or more) options below that sound of interest to you.**

How soon could you/ when are you looking start (date)? \_\_\_\_\_

	Opportunity	Commitment Required	Days your available during the week?	Number of hours you can commit on these days?
	The Carroll Store	weekday, 1 day a week, 3 hours minimum		
	Teaching Assistant	weekday, 1 day a week, 3 hours minimum		

	<b>Opportunity</b>	<b>Commitment Required</b>	<b>Days your available during the week?</b>	<b>Number of hours you can commit on these days?</b>
	<b>Reception Desk</b>	weekday, 1 day a week, 4 hours minimum		
	<b>Operations/ Administrative Support</b>	weekday, 1 day a week, 4 hours minimum		
	<b>Historical Data Cataloging/ Recording</b>	weekday, 1 day a week, 2 hours minimum		
	<b>Dining Hall</b>	weekday, 12:00 to 1:00pm lunch service, 1 day a week, 2 hour minimum		
	<b>Grounds or Maintenance</b>	weekday, 1 day event or more		
	<b>Share your Talent!</b>	weekday, 1 day a week, weekend are an option if you're not available during the week		

**Restrictions (if any):** \_\_\_\_\_

**Reference:** Individual who can be contacted (non-family member)

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_ Working Relationship to you: \_\_\_\_\_

**1. What experiences/skills to you bring to a volunteer position?**

**2. What volunteer work have you done in the past?**

**3. Do you speak any other languages than English?**

**4. Do you have a family member who is visually impaired?**

**5. Are you doing this volunteer activity as a requirement for a school/course? If so, please list the program and contact:**

**6. Will your hours need to be verified?**

**\*Please attach a resume if you have one and/or list special skills you have, especially technology/computer programs. \***