



2017 Volunteer Application Form

Please send your completed application form by mail, fax, or email to:

Encore Leadership Corps
UMaine Center on Aging
25 Texas Avenue, Camden Hall
Bangor, ME 04401
Fax number: 207-262-7921
E-mail: info@encoreleaders.org

In order to qualify as an ENCorps volunteer you must be aged 50 or older and:

- Be from the state of Maine
- Have a strong interest in community development, community health, and/or environmental stewardship
- Be willing to volunteer (or currently volunteering) for a local planning board, environmental organization, community program, or participate in other opportunities that fit with the goals of the Corps (prior volunteer experience of any type preferred). Our goals focus on improving the economic, environmental, and human health of Maine communities.
- Have a strong interest in lifelong learning
- Be available to attend the annual ENCorps Summit

1. Personal information (Please print)

Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Home phone: _____

E-mail address: _____

Age: _____ years Gender: Male _____ Female: _____

2. Do you have Internet access? Yes _____ No _____

3. Why are you interested in being an ENCorps Volunteer?

4. How did you learn about the Encore Leadership Corps?

5. Do you attend or participate in any of these organizations? Check all that apply and write in the name of the organization, agency, or town/city with which you are affiliated. If these do not apply write N/A below.

Name Here

- | | | |
|------------------------------------|-------|-------|
| a. Area Agency on Aging | _____ | _____ |
| b. Senior College | _____ | _____ |
| c. RSVP or other volunteer program | _____ | _____ |
| d. Community Action Agency | _____ | _____ |
| e. Other agency/organization | _____ | _____ |
| f. Municipal township/city | _____ | _____ |
| g. Other | _____ | _____ |

6. Briefly describe any past involvement or experience you have had in environmental, community development, or community health projects or activities. If this does not apply to you, please describe other past volunteer experiences you have had including any boards or committees you have previously served on (use a separate sheet of paper if needed).

7. Please describe what, if any, volunteer activities you are currently doing.

We would also appreciate it if you could provide any available contact information for organizations or projects where you volunteer. ENCorps collects contact information so that we can let these organizations or projects know about opportunities of potential interest to them and to refer other individuals who may be looking for new volunteer opportunities. If you have more than three projects you would like to include, please attach an extra sheet of paper.

Organization or Project Name:

Contact Name: _____ **Phone Number:** _____

Street Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Brief Description of Volunteer Activities:

Organization or Project Name:

Contact Name: _____ **Phone Number:** _____

Street Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Brief Description of Volunteer Activities:

Organization or Project Name:

Contact Name: _____ **Phone Number:** _____

Street Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Brief Description of Volunteer Activities:

Questions or want to fill out the application over the phone? Please call us at 207-262-7928 or email info@encoreleaders.org

Applicant signature

Date