FISH VOLUNTEER APPLICATION

Please complete and return either to FISH at
7129 Pocahontas Trail, Williamsburg, VA 23185,
or mtonka@cox.net.
(Volunteers must be at least 18 years old.)

Date _____

Name _____

Address _____

Phone _____ Email _____

Emergency Contact: Name_____ Phone _____

Areas of Interest: ____Food Pantry ____Clothes Room

Availability: ____Weekly____Monthly ____1/2 day ____Full day

Which day(s) work best for you?

____Monday ____Tuesday ____Wednesday ____Thursday ____Friday

_____

Language spoken in addition to English _____

How did you hear about FISH? _____

List related Work/Volunteer Experience that will be an asset to your work at FISH:

_____

_____

To be completed by Interviewer:

_____Date Applied _____Date of Orientation

Assignment(s) _____

Day(s) _____ ____1/2 day ____Full day

Comments _____

_____

Interviewed by: _____

Revised 11/6/2026