



**THRIFT SHOP VOLUNTEER APPLICATION**

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

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

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

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

Emergency Contact: \_\_\_\_\_

Phone: \_\_\_\_\_ Relationship: \_\_\_\_\_

**SKILLS AND INTERESTS:**

\_\_\_\_\_

Volunteer experience:

\_\_\_\_\_

**AVAILABILITY** *please check preferences* yearly ( ) summer ( ) winter ( )

Monday ( ) Tuesday ( ) Wednesday ( ) Thursday ( ) Friday ( )

10am to 2pm ( ) 1pm to 5pm ( )

The shop is open 11:00am – 4:00pm on Saturdays ( )

What type of work are you interested in? Please indicate below:

( ) merchandise sorter/back processing area ( ) cashier/storefront

**REFERENCES (2) *not family members***

1. Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

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

2. Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

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

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Please complete & return to:**  
The Alcove 376 Tilton Rd.- Rear Northfield, NJ 08225  
Or email back to [kelly@thealcove.org](mailto:kelly@thealcove.org)