

## APPENDIX A: Information Collected on Volunteer.gov

### A. Initial profile creation page:



### Create an Account

\* First Name

First Name

\* Last Name

Last Name

\* Email Address

Email Address

I am 18 years of age or older. <sup>?</sup>

I am a U.S. Resident. <sup>?</sup>

I have read and agree to the [terms of use](#).

SUBMIT

### B. Complete profile page.

Note: when applying to a specific volunteer opportunity, all applicable information from the profile is auto-filled for the volunteer.

**Volunteer Profile**

Other Information

Gender

Ethnicity

Race

Military Status

National Service Status

Do you have a disability?  
No

Country of Citizenship

Verification Status

Type of Visa

Languages Spoken

Language: Other

Skills

Skills, Other

Other interests

Education Summary (for positions only)

Certifications

Certifications, Other

Education 1 Institution

Education 1 Level

Education 1 Year Received

Education 1 Field of Study/Major

Education 2 Institution

Education 2 Level

Education 2 Year Received

Education 2 Field of Study/Major

Education 3 Institution

Education 3 Level

Education 3 Year Received

Education 3 Field of Study/Major

Experience Summary (for positions only)

Have you volunteered before?

Work/Volunteer Experience

∨ Experience Summary (for positions only)

Have you volunteered before?

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Work/Volunteer Experience: 0

∨ References (for positions only)

Reference 1 Name

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Reference 1 Phone/Mobile

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Reference 1 Relationship: 0

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Reference 1 Email

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Reference 2 Name

---

Reference 2 Phone/Mobile

---

Reference 2 Relationship: 0

---

Reference 2 Email

---

Reference 3 Name

---

Reference 3 Phone/Mobile

---

Reference 3 Relationship: 0

---

Reference 3 Email

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∨ Affirmations

Agree to Photo Release? 0

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Emergency Contact

Emergency Contact Name

Emergency Contact Phone/Mobile

Emergency Relationship

Emergency Contact Email

Parent/Guardian Contact (required if volunteer is under 18)

Parent/Guardian Name

Parent/Guardian Email

Parent/Guardian Phone/Mobile

Parent/Guardian Address (if different from volunteer's address)

Parent/Guardian Street

Parent/Guardian City

Parent/Guardian Country  
United States

Parent/Guardian State

Parent/Guardian Zip/Postal Code

System Information

Acknowledge

Receive surveys and other notifications

Above data is accurate to my knowledge

Opportunity Matching

States of Interest

Categories of Interest

Other Categories of Interest

About Me

Salutation

Date of Birth

First Name  
Shari

Email  
shariaorr@gmail.com

Middle Name

Phone/Mobile

Last Name  
Orr

Suffix

Address

Street

City

Country  
United States

State

Zip/Postal Code

## C. Apply to a Volunteer Opportunity page

Note: All information from volunteer profile auto-fills.

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### Step 1 of 3: Personal Information



#### BASIC DETAILS

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We use this information to help verify your eligibility.

Salutation

\* First Name

Complete this field.

Middle Name

\* Last Name

Complete this field.

Suffix

\* Date of Birth

Complete this field.

Military Status ⓘ

National Service Status

\* Country of Citizenship

## ADDRESS & CONTACT INFORMATION

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We use this information to help match you with appropriate volunteer opportunities.

\* Street

\* City

\* Country

\* State

\* Zip/Postal Code

\* Phone/Mobile

\* Email

\* Are you willing to have your Application forwarded to other Federal Agencies?

Yes

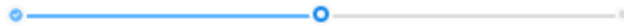
No

\* Agreement to use photograph and likeness in publications, news releases, on-line and other communications related to volunteer service.

Yes

No

## Step 2 of 3: Skills & Requirements



\* Required Field

### SKILLS & LANGUAGES

What languages do you speak? You can select more than one option.

Languages Spoken ⓘ

Select an option...

Do you have any skills, qualifications, or experiences? Check all that apply.

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Backpacking/Camping       | <input type="checkbox"/> Biology                   | <input type="checkbox"/> Boat Operation        |
| <input type="checkbox"/> Carpentry                 | <input type="checkbox"/> Clerical/Office Machines  | <input type="checkbox"/> Computer Programming  |
| <input type="checkbox"/> Drafting/Graphics         | <input type="checkbox"/> Driver's License          | <input type="checkbox"/> First Aid Certificate |
| <input type="checkbox"/> Hand Power Tools          | <input type="checkbox"/> Heavy Equipment Operation | <input type="checkbox"/> Horses - Care/Riding  |
| <input type="checkbox"/> Landscaping/Reforestation | <input type="checkbox"/> Land Surveying Back       | <input type="checkbox"/> Livestock/Ranching    |
| <input type="checkbox"/> Map Reading or GIS/CPS    | <input type="checkbox"/> Mountaineering            | <input type="checkbox"/> Other Trade Skills    |
| <input type="checkbox"/> Photography               | <input type="checkbox"/> Public Speaking           | <input type="checkbox"/> Research/Librarian    |
| <input type="checkbox"/> Sign Language             | <input type="checkbox"/> Supervision               | <input type="checkbox"/> Teaching              |
| <input type="checkbox"/> Working with People       | <input type="checkbox"/> Writing/Editing           | <input type="checkbox"/> Other                 |

## WORK/VOLUNTEER EXPERIENCE

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List previous work or volunteer experience. Provide company/organization name, contact information (address, phone, email), and description of your work.

## ACCESSIBILITY

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Do you have any physical limitations that need accommodation?

- Yes  
 No

## HOUSING & ACCOMMODATION

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If available, will you require on-site housing?

- Yes  
 No

## YOUR AVAILABILITY

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Please select your availability preferences. You can select more than one option.

Days Available

Months Available

Please estimate how many hours you are available to volunteer.

\* Available Hours ⓘ

## YOUR EDUCATION

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Please enter your education information.

\* Education 1 Institution ⓘ

\* Education 1 Level ⓘ

\* Education 1 Field of Study/Major ⓘ

\* Education 1 Year Received ⓘ

Education 2 Institution ⓘ

## EMERGENCY CONTACT

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Please let us know who to contact in case of emergency.

\* Emergency Relationship ⓘ

\* Emergency Contact Name

\* Emergency Contact Phone/Mobile

## YOUR REFERENCES

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Reference 1

\* Reference 1 Relationship ⓘ

\* Reference 1 Name

\* Reference 1 Phone/Mobile

\* Reference 1 Email

## Step 3 of 3: Finishing Up



\* Required Field

## ADDITIONAL COMMENTS

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Please tell us why you are interested in this opportunity and what makes you a good fit.

Please tell us why you are interested in this opportunity and what makes you a good fit. ⓘ

Is there anything else you would like us to know?

Is there anything else you would like us to know? ⓘ

How did you learn about this opportunity?

How did you learn about this opportunity? ⓘ

## VERIFICATION

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Please confirm the following:



\* I agree to a background check ⓘ



\* Above data is accurate to my knowledge ⓘ



\* I verify that I have read and agree to the Volunteer Application Terms