



1102 Dow St. Murfreesboro, TN 37130  
P: 615-904-7170 F: 615-904-7288

## Branches Volunteer Application

Name: \_\_\_\_\_ Age: \_\_\_\_\_ Birthdate: \_\_\_\_\_

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

Phone: (cell) \_\_\_\_\_ (other) \_\_\_\_\_

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

### Areas of Interest:

1. Front Office: answering phones/returning calls, filing, scheduling clients, processing payments, digitizing files, verifying insurance benefits \_\_\_\_\_
2. Back Office: making copies, organizing resources \_\_\_\_\_
3. Housekeeping: cleaning, yard work, decorating seasonally \_\_\_\_\_
4. Hospitality: preparing food for Intensive Week, Open House, Board Meetings; Booking Joint Benefit Concerts w/Chonda \_\_\_\_\_
5. Technology: computer and system updates, phones, printers, website updates \_\_\_\_\_

Have you ever volunteered for a non-profit? \_\_\_\_\_ If so, in what capacity?

\_\_\_\_\_  
\_\_\_\_\_

Why would you like to volunteer with Branches?

\_\_\_\_\_  
\_\_\_\_\_

How many hours (weekly) and what days/times are you able to commit?

\_\_\_\_\_  
\_\_\_\_\_

Share some information about your life to help us get to know you better:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Once completed, please return to Branches Counseling Center at above-listed address. For questions, contact Christina Benefield at 615-904-7170 or [cbenefield@branchescounselingcenter.com](mailto:cbenefield@branchescounselingcenter.com).