

CRISFIELD/SOMERSET CO. VOLUNTEER WORKER APPLICATION

DIOCESE OF EASTON WORK WEEK

MAY 11 – 17, 2014

NAME _____

ADDRESS _____

PHONE: HOME _____ CELL _____ EMAIL _____

DATES AVAILABLE TO WORK _____

EMERGENCY CONTACT:

NAME _____

ADDRESS _____

PHONE: HOME _____ CELL _____ EMAIL _____

DATE OF LAST TETANUS SHOT – **REQUIRED** ___/___/___ (write on the back of your license)

MEDICAL INSURANCE: _____

POLICY NUMBER: _____

SECONDARY INSURANCE: _____

POLICY NUMBER: _____

SKILLS:	LICENSED/TEACH	SKILLED	NEED GUIDANCE	NOVICE	NONE
ELECTRICAL	_____	_____	_____	_____	_____
PLUMBING	_____	_____	_____	_____	_____
ROOFING	_____	_____	_____	_____	_____
FRAMING	_____	_____	_____	_____	_____
FLOORING	_____	_____	_____	_____	_____
DRYWALL	_____	_____	_____	_____	_____
TAPE & MUD	_____	_____	_____	_____	_____
TRIMWORK	_____	_____	_____	_____	_____
CABINET INSTALL	_____	_____	_____	_____	_____
PAINTING	_____	_____	_____	_____	_____
OFFICE	_____	_____	_____	_____	_____
OTHER	_____	_____	_____	_____	_____

COOKING/SHOPPING/ETC. FOR LIVING QUARTERS _____