

Shore Legal Access Volunteer Form

Full Name: _____ **Date** _____

Address: _____

Phone #: _____ **Email:** _____

How would you like us to contact you? Phone ___ Email___ (Please check one.)

Days of the week available to volunteer: _____

Time of day you are available (please check all that apply):

Morning ___ Midday ___ Afternoon ___ Evening ___ Weekends ___

I am available to volunteer in the following counties (please check all that apply):

Kent Talbot Caroline Dorchester Queen Anne's Wicomico/Lower Shore

Skills/Experience:

___ Education/training _____	___ Fluent in Spanish
___ Advance Degree _____	
___ Networking	___ Other Languages _____
___ Marketing	___ Understands and speaks basic Spanish
___ Writing/publishing	___ Other Languages _____
___ Social media communications	___ Fundraising
___ Digital image editing	
___ General office skills	___ OTHER: _____

I am comfortable:

___ Working one-on-one with clients
___ Speaking to small groups
___ Speaking to large groups
___ OTHER: please tell us _____

Volunteer Interest(s) – Please check all that apply:

___ Clinic Assistant (check-in/greet clients, collect paperwork)
___ Answering phones / Office support
___ Promoting MSPB via social media
___ Speaking about MSPB to groups or organizations
___ Assembling packets/bulk mailings
___ Typing/editing documents
___ Grants research/Writing
___ Help with Intakes at the Courthouse
Anything else we should know?

