



VOLUNTEER SERVICE APPLICATION

Guiding Principles

We provide volunteer service and in-kind support to organizations and programs that fulfill the Rotary International Areas of Focus:



Peace and Conflict Prevention/Resolution



Maternal and Child Health



Disease Prevention and Treatment



Basic Education and Literacy



Water and Sanitation



Economic and Community Development

Community organizations that provide services in these areas may apply for assistance from Jacksonville Rotary.

Guidelines

We enjoy participating in as many community organizations as we can, but it is not feasible to fulfill every request. Therefore we prefer organizations and programs that meet the following guidelines:

- Is located in our community.
- Although not required, we prefer to support organizations and programs that serves one or more of the Rotary Areas of Focus.
- Past support does not guarantee future support.
- To allow for adequate time for review and response, submit your request a minimum of 45 days prior to the date of your event.
- Regretfully, we are not able to assist individuals who need help for a personal crisis or medical problem.

SERVICE ABOVE SELF



APPLICATION FOR SERVICE VOLUNTEERS

Attach Additional Sheets as Necessary

Name of Organization: _____

Contact Person Name: _____ Phone: _____

Mailing address: _____

Email address: _____

How many volunteers are you requesting? _____

How many hours? _____ How many shifts? _____

Dates and times needed: _____

of People to be served: _____

Check the Area of Focus for which you are requesting support:

- Peace & Conflict Prevention/Resolution
- Disease Prevention and Treatment
- Water and Sanitation
- Maternal and Child Health
- Basic Education and Literacy
- Economic and Community Development

What is the purpose of your organization or program?

How will volunteers be used by your organization?

Will the Jacksonville Rotary Club be recognized for its contribution? If so, how?

Are you willing to give a presentation to Rotary about your organization?

If so, please list Fridays on which you may be free to do so.

Signature of Responsible Party: _____ Date: _____

Return to:
Jacksonville Rotary Club
c/o Ginny Fanning
15 Aaron Dr., Jacksonville, IL 62650

Or email a scanned copy to:
GinnyFanning3@gmail.com
with the subject line: ROTARY CHARITY