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## VOLUNTEER PROFILE APPLICATION

Name: \_\_\_\_\_

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

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

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

Employment Experience: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Education: \_\_\_\_\_

\_\_\_\_\_

Special Skills: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Do you have any special needs? If so, what are they? \_\_\_\_\_

\_\_\_\_\_

What would you like to do as a Volunteer and why? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

What day would you like to Volunteer? \_\_\_\_\_

\_\_\_\_\_

What do you know about Parkinson's disease?: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_