



GROUP SERVICE PROJECT REQUEST FORM

Thank you for interest in bringing a group to volunteer with Catholic Charities Eastern Washington. We have a number of options for group service projects, so please review our group service options posted online before proceeding with this questionnaire: [CCEW Group Service Opportunities](#)

Our goal is to find the best volunteer placement for your organization, so please be as specific as possible in your responses. We need at least two weeks lead time to place a group for volunteer service. After we receive your response and set up your project, the group's leader and any chaperones will need to fill out our online volunteer application in order for us to finalize your service project.

What is the name of your group?

What is the contact information for the leader of your group?

Name:

Cell phone:

Alternate/Office phone:

Email:

What type of group are you?

☐ *Corporate/Business*

☐ *Church/Religious Organization*

☐ *School*

☐ *Civic group*

☐ *College club*

☐ *Government agency/department*

☐ *Youth group*

☐ *Other :*

Have you volunteered with us before?

☐ *Yes*

☐ *No*

If so, please provide details:

How many people do you plan on bringing?

Is everyone over 18?

(Groups with participants under 18 will need 1 chaperone per 10 underage volunteers).

☐ *Yes*

☐ *No*

Do you all want to be together or can we split you up to different sites/projects?

☐ *Together*

☐ *Different Sites*

☐ *No Preference*

Do you have a preference on being inside or outside (weather dependent)?

☐ *No preference*

☐ *Inside*

☐ *Outside*

What days of the week would work best for you?

(Please note: Many of our programs are not open on Sundays so group placements are very limited.)

☐ *Monday*

☐ *Friday*

☐ *Tuesday*

☐ *Saturday*

☐ *Wednesday*

☐ *Sunday*

☐ *Thursday*

Is there a specific day/time you want to volunteer?

How many hours would be ideal for your group to volunteer? (We prefer 2-3 hour shifts)

Have you already discussed doing a service project with a Catholic Charities staff member? If so, please list the Staff Name and Program Name:

Did you have a particular site or program in mind? If so, which one?

Is there a particular type of volunteer work you would like to do?

☐ *Support for homeless and those transitioning out of homelessness*

☐ *Food/Meal preparation*

☐ *Sort donations*

☐ *Decorate for the holidays at a program or shelter*

☐ *Assist with play supervision for children or with children's activities*

☐ *Moving assistance for seniors or disabled adults*

___ *Help weed/tend our community gardens*

___ *Holiday assistance distribution*

___ *Assist our programs with yard and/or facility maintenance*

___ *Home and yard maintenance for seniors or disabled adults*

___ *Other:* _____

What else should we know about you to give you the best volunteer placement?

Do you have any particular learning or team building goals for your service project we should be aware of?

Would you be interested in doing a donation drive as part of your services? (e.g. a towel drive for House of Charity, a school supply drive for St. Anne's or a food drive for St. Margaret's)

DATE OF REQUEST SUBMISSION:

PLEASE NOTE: The Group Leader must sign a Hold Harmless Agreement during the volunteer application process for their group to be able to participate in our volunteer opportunities. The Group leader should have emergency contact information on hand for each volunteer on the day of service. If you are bringing participants under the age of 18, please confirm prior to the service project that you have parental permission forms on file for each participant. (If the forms do not have a photo release, the parents of each child will need to fill out permission slip to that effect.)

Thank you for your offer of service. Please scan and send the completed request form to kkain@ccspokane.org.

We will be in touch soon to discuss your service project! If you have any questions in the meantime, please email us at kkain@ccspokane.org or call us at 509-358-4270.