



Volunteer Interest Form TAX HELP MONTANA

Name: _____ Date of Birth: _____
 Phone #: _____
 Street Address: _____
 City: _____ State: _____ Zip Code: _____
 Email Address: _____
 Emergency Contact Name _____ Phone # _____
 Special Skills/Experience: _____

Are you a previous Tax Help MT Volunteer? YES NO

If "NO", how did you hear about our program?

- | | | |
|---|---------------------------------------|--|
| <input type="checkbox"/> Used Service in Past | <input type="checkbox"/> RDI Website | <input type="checkbox"/> Word of Mouth |
| <input type="checkbox"/> Newspaper | <input type="checkbox"/> Social Media | <input type="checkbox"/> Radio |
| <input type="checkbox"/> Montana Free File | <input type="checkbox"/> United Way | <input type="checkbox"/> Other _____ |

When are you available to volunteer? Please fill in all that apply:

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Morning							
Afternoon							
Evening							

Please tell us what type of volunteering you would be interested in:

- | | | | |
|---|---------------------------------------|--|---|
| <input type="checkbox"/> Screening | <input type="checkbox"/> Tax Preparer | <input type="checkbox"/> FAFSA Preparer | <input type="checkbox"/> Quality Reviewer |
| <input type="checkbox"/> Site Coordinator | <input type="checkbox"/> Greeter | <input type="checkbox"/> Saving Specialist | <input type="checkbox"/> IT/Technical |

Where are you available to volunteer? _____

Why do you want to volunteer?

- | | | | |
|---|--|---|---|
| <input type="checkbox"/> Want to Help Others | <input type="checkbox"/> Have Experience/Skills | <input type="checkbox"/> Seeking Experience/Student | <input type="checkbox"/> Interested in Work |
| <input type="checkbox"/> Encouraged by Employer | <input type="checkbox"/> Worked with VITA Before | <input type="checkbox"/> Retired/Keeping Skills | <input type="checkbox"/> Friend Involved |

Questions?

Contact Jessie Murray, Tax Help Montana Program Manager
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