



Neighbors Helping Neighbors Volunteer Application Form

First name				L	Last name							
Email_				F	hone							
Preferr	ed forr	n of contact: E	mail or Text									
Addres	s						Date:					
Which	neighb	orhood do yo	u live in?									
0	Don't know			0	o Greater East Side			o Summit Hill				
0				0	Hamline-Midway			0	 Summit-University 			
0	o Como			0	Highland			0	o Thomas -			
0	o Dayton's Bluff			0	Macalaster-Groveland				Dale/Frogtown			
0				0	North End			0	Union Park			
 Eastview - Conway - BC 			0	Payne-Phalen			0	West 7th/Fort				
- Highwood Hills			0	St. Anthony Park			0	> West Side				
Neighb	orhood	ds to serve in:										
 All Neighborhoods 			0	Dayton's Bluff			0	 North End 				
Listed				0	<u> </u>			o Payne-Phalen				
Service	oppor	tunities:										
o Team Lead			0	 Water Engagement 			0	Yard Proj	ect Volunteer			
0	Tool	Hauler			Volun	teer						
Indicat	e availa	ability by placi	ng an x or 🗸	durin	g times	that you are av	ailable:					
		Sunday Monday Tues		sday Wednesday Th		Thursday	Fr	iday	Saturday			
Morn												
After												
Eveni		L										
My ava	illabilit	y is:										
0	Ongo	ing										
0	_	ing, except be	tween these	dates: _	ar	nd						
0		between these										
I am av	ailable	to serve:										
0	As of	ten as possible	2	0	Every	other week		0	One time			
0	Week	•		0	Month	-						
Emerge	ency Co	ntact Name: _										
Emerge	ency Co	ontact's Phone	Number:									





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How di	d you hear about us?				
0	City of Saint Paul Staff	0	Facebook or Twitter	0	Other:
0	City of Saint Paul	0	Friend of Family		
	Website		Member		
0	Current or Former	0	Internet Search		
	Volunteer	0	School		
Langua	ges Spoken:				
0	English	0	Ka Nyaw	0	Soomaali
0	Español	0	Khmer	0	Vietnamese
0	Hmoob	0	Laothian	0	Other:
Agreen	nent:				
may be notifica send th	out this form is entirely voluntary. In classified as private under the Minr itions and newsletters, the telephon e notices, updates, and newsletters d by the City under certain circumst	nesota e nun you r	Government Data Practices Act hber and email that you provide equest. Your telephone number	. If you are will be use and email	e signing up for City ed by City employees to may also be publicly
	m also asks you for information abo	•	·		

Please check the box if you have read and agree to this statement.

you should only provide information about you that you feel comfortable sharing.

o I Agree

Please mail completed application to:	
Neighbors Helping Neighbors	
15 W Kellogg Blvd. Suite 700	
Saint Paul, MN, 55102	

contact information you give as part of that message. Public data that is maintained by the City can be accessed by any person for any reason – it's part of our system of public transparency and accountability. For these reasons,