



2019 Food Assistance Study Volunteer Information

Thank you so much for your interest in participating as a Volunteer Data Collector for the 2019 Food Assistance Study. Please submit the completed application to Kelly Seigh via email: kseigh@rifoodbank.org or mail: **Attn: Kelly Seigh, RI Community Food Bank, 200 Niantic Avenue, Providence, RI 02907**

Personal Information

First & Last Name: _____

Are you 18 years of age or older? Yes No

Street Address: _____

City: _____ Zip Code: _____

Employer/School: _____ Occupation/Major: _____

Home Phone: _____ Cell Phone: _____

Work Phone: _____ May we call you at work? Yes No

Email Address: _____

Do you have regular access to email and/or the Internet? Yes No

Are you comfortable using technology, specifically a touchpad tablet? Yes No

Are you bilingual? Yes No If Yes, what languages do you speak? _____

Are you willing to travel to any town or city in Rhode Island? Yes No

Preference of interview county locations:
Bristol Kent Newport Providence Washington

Availability

Please indicate the times that you are generally available to volunteer from April through June 2019.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Early morning (before 9:00 AM)							
Morning (9:00 AM - 12:00 PM)							
Afternoon (12:00 PM - 5:00 PM)							
Evening (5:00 PM - 9:00 PM)							

Training Sessions

The Rhode Island Community Food Bank requires all Data Collectors to participate in one mandatory training for this opportunity. We will provide you with the information, materials, and practice needed to properly conduct this study.

We will notify you when a training session is scheduled.

I acknowledge that the information I have provided above is correct and true, and commit to participating as a volunteer Data Collector for the 2019 Food Assistance Study.

Signature: _____

Date: _____