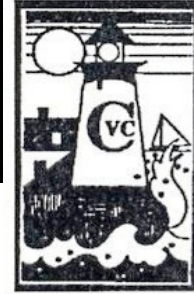


Corporate Volunteer Council of Racine



Application for Membership

Organization Name: _____ Date: _____

Address: _____

Name of Representative: _____

Title: _____

E-mail: _____ Phone: _____

Fax: _____

1) How many people does your organization employ in the Racine area: _____

2) Does your organization have a written policy on volunteerism? _____

3) What program structure do you currently have to promote employee volunteerism?

____ No formal structure

____ Single coordinator for program ____ Full Time ____ Part Time

____ Several coordinators, spread over different departments ____ Full Time ____ Part Time

____ Committee or team directed

____ Other, please specify _____

4) If you have an employee volunteer program, how long has it been in existence? _____

5) Briefly describe your organization's volunteer program, if one exists.

6) What methods are used to recruit employees for volunteer activities? (newsletter, bulletin board, word of mouth, etc.)

(Over)

7) Are there special incentive programs for volunteers? Please describe.

8) Does your organization have special recognition events for volunteers? Please describe.

9) In what specific areas can the CVCR help you?

Seminars
 Volunteer training
 Volunteer management
 Idea exchange
 Other, please specify _____

10) Are you aware of other organizations with volunteer programs that we should include in future plans?

Please return CVCR application with your membership dues to:

The Corporate Volunteer Council of Racine
c/o RAMAC
300 Fifth Street
Racine, WI 53403
(262) 634-1931

Checks should be made payable to: The Corporate Volunteer Council of Racine
Annual Dues: Up to 100 employees – \$100.00, Over 100 employees – \$200.00