

## GROUP VOLUNTEER APPLICATION

Thank you for your interest in volunteering with CJE SeniorLife. We will work with you to fulfill your request. Please complete the information below to help make a mutually beneficial placement. **Submit completed form to Volunteer Services at [volunteers@cje.net](mailto:volunteers@cje.net) or call 773.508.4232.**

### GROUP INFORMATION

Name of Group/Organization

Website

Organization Street Address

City

State

Zip

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### CONTACT INFORMATION

Contact Name

Title

Contact Email

Contact Phone

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### VOLUNTEER INFORMATION

Volunteer Activity

Requested Date(s) of Service

Time Preference

Approx. Number of Volunteers

If Students, Provide Approx. Age

Number of Adults Accompanying Students

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I understand that as a Volunteer I would not be allowed to discuss any confidential or privileged information that relates to CJE, our staff, clients, residents, operations and activities with anyone other than my direct CJE supervisor or Volunteer Services. All confidential information should not be disclosed or discussed with anyone without permission or authorization. I signify below that I agree to the above terms.

Signature

Date

773.508.4232

CJE SeniorLife  
Volunteer Services  
3003 W. Touhy Avenue  
Chicago, IL 60645

[volunteers@cje.net](mailto:volunteers@cje.net)