Form: Volunteer
Revised: 06-08-16

Mid-North Neighborhood
Six Neighborhoods. One Plan.

Volunteer Form

Check all that apply:

- ❑ Resident
- ❑ Strategic Partner _____

Name: _____
(Please print) First MI Last

Address: _____

Neighborhood: _____

Phone: _____ Home _____ Mobile

Email: _____

LinkedIn Profile: _____

Contact Preference:
(Check all that apply)

- ❑ Email
- ❑ In-person
- ❑ Phone
- ❑ Print mail
- ❑ Social Media

How did you hear about Quality of Life Plan? _____

Do you currently sit on your neighborhood association board? ❑ Yes ❑ No

Please indicate which part of the plan you are most interested (check all that apply):

- ❑ Aesthetics/Beautification
- ❑ Business Development
- ❑ Crime & Safety
- ❑ Destination Fall Creek
- ❑ Health
- ❑ Housing
- ❑ Marketing & Outreach
- ❑ Senior Advocacy
- ❑ Youth Engagement

Describe your biggest strengths, skills, and/or talents: _____

_____

_____

Please indicate if you have experience in any of the following areas (check all that apply):

- ❑ Accounting or Budgeting
- ❑ Chairing or Leading Committees
- ❑ Communications
- ❑ Cooking
- ❑ Editing
- ❑ Event Planning
- ❑ Facilitating
- ❑ Fundraising
- ❑ Grant Writing
- ❑ Graphic Design
- ❑ Legal
- ❑ Marketing
- ❑ Outreach
- ❑ Real Estate
- ❑ Sales
- ❑ Other _____

List your top 3 (three) improvements you would like to see in your neighborhood:

_____

Are you currently involved in any neighborhood projects? ❑ Yes ❑ No

If yes, which ones? _____

_____

Should they be integrated into the QOL Plan if they are not already? ❑ Yes ❑ No

How many hours a week could you volunteer for QOL Plan? _____

What days and times are you available?

- ❑ Sun _____
- ❑ Mon _____
- ❑ Tues _____
- ❑ Wed _____
- ❑ Thurs _____
- ❑ Fri _____
- ❑ Sat _____

Send completed form to info@midnorthplan.org or Mapleton-Fall Creek Development Corporation at 130 E. 30th Street, Indianapolis, IN 46205