

**Volunteer Application**

Yes She Can Inc. is a 501c3 nonprofit organization dedicated to helping young women with autism gain transferable job skills to enable them to become employed in a field of their choice. To achieve our goal, Yes She Can operates a training program in an authentic retail setting: Girl AGain, a resale boutique for gently used American Girl ® dolls and all their accessories, located in White Plains, NY.

We seek volunteers, both professionals and non-professionals in the following areas:

**For Girl AGain boutique**

* Peer mentoring and social support of our trainees
* Retail store operations
* Preparing merchandise for sale
* In store customer events (assisting children in craft activities)
* Job coaching
* Marketing
* Merchandise acquisition

**For Yes She Can organization**

* Fundraising
* Grant writing
* Financial management
* Tech support
* Board development
* Non-profit management

All volunteer positions are unpaid. Volunteers under the age of 18 must have a parent sign the application.

**For more information contact:**

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President, Yes She Can Inc.

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White Plains, NY 10605

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[www.YesSheCanInc.org](http://www.YesSheCanInc.org)

Girl AGain

4 Martine Avenue

White Plains, NY 10606

914-358-1460

[www.GirlAGain.com](http://www.GirlAGain.com)

Yes She Can Inc. operating Girl AGain boutique **Volunteer Application**

|  |  |
| --- | --- |
| Date |  |
| Name |  |
| street address |  |
| city/state/zip |  |
| home phone & cell phone |  |
| email address |  |
| School/Grade or Company/Position |  |
| Days and hours available for volunteering |  |
| What interests you in volunteering forYes She Can? |  |
| Describe any experience in retail field |  |
| Describe any non-profit experience |  |
| Describe any experience with teens/adults with autism |  |
| What type of assignment are you interested in?  |  |
| what are your expectations from your volunteer experience? |  |
| References: | Name: phone: email: |

All volunteer work is unpaid. Volunteers under 18 years old will be supervised by an adult at all times.

For volunteers under 18 years old, parent must sign a waiver.

I acknowledge that the information above is correct. I authorize my minor child to volunteer with Yes She Can Inc.

Parent Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_