

Days of Caring 2008

Project Application

Please fill out a separate application for each project.

Part 1: Contact Information

Agency Name: _____ Program: _____

Agency Address: _____ City/Town: _____

Contact Name: _____ Contact Phone: _____

Contact Email: _____

Part 2: Project Information

Brief description of project:

Which category best describes your project? Landscaping Painting Cleaning Food/Clothing Drive
 Construction Tutoring Other: _____

Is the project Indoor Outdoor?

How many volunteers are needed to complete this project in a regular work day? _____

Will you be providing lunch for volunteers? (You are not required to provide meals to volunteers) Yes No

Do you have all the necessary materials, tools, permits for this project? Yes No

Does this project require a site visit/evaluation before your Day of Caring? Yes No

Project location: _____ City/Town: _____

Contact person on project site: _____ Contact Phone: _____

Contact Email: _____

Agencies are required to provide all materials, tools, and necessary permits for their Day of Caring projects.

Please fill out a separate application form for each project and return ASAP.

View projects online at www.uwgat.org/Get Involved/Day of Caring.

Mail to the attention of Emily Treano, United Way, 247 Maple Street, Attleboro, MA 02703 Fax to: 508.222.4190

For more information, please contact Emily Treano at 508.222.2337, ext. 116 or email emily@uwgat.org.

volunteering matters.