



5. If these opportunities are current functions of your agency, who currently performs these functions?  
 staff  volunteers  staff positions currently vacant  combination  other

Please explain \_\_\_\_\_

6. Can your agency host community service participants for up to 17 hours per month?  
 Yes  No

Are there a particular number of hours or days or set hours that you would prefer potential volunteers to be available to your organization? \_\_\_\_\_

7. Is it possible that this volunteer work could lead to an offer of for paid employment to community service participants?  Yes  No

8. Can you accommodate community service participants who do not speak English?  Yes  No

If so, what language(s) can you accommodate? \_\_\_\_\_

9. Is your facility accessible to persons with disabilities?  Yes  No

10. May we list your organization, contact information and a brief description of volunteer duties on our SNAP Path to Work website (<http://snappathtowork.org/>) so that potential volunteers may contact you directly?  Yes  No

If yes, please indicate the contact name and phone number that should be listed:

\_\_\_\_\_

Additional information, comments, questions regarding your organization's participation in the SNAP Community Service Program (Attach additional sheets if more space is needed):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please return this questionnaire to:

DTA, SNAP E&T Unit  
600 Washington Street  
Boston, MA 02111  
Fax: (617) 348-5093