



Volunteering Information

Thank you for your interest in potentially volunteering with us at Sarah Bellum's Bakery & Workshop, a non-profit program in Multnomah Village in SW Portland whose mission is to empower adults with acquired brain injury to re-engage in the community and re-build a sense of purpose and identity through return-to-work in our functional rehabilitation bakery program.

Our staff is comprised mostly of volunteers, including our crew with brain injuries and our support staff. The requirements for volunteers are listed below. If you meet these requirements, please complete the attached application form and return it to us.

If you are a **survivor of an acquired brain injury**, here are the requirements:

- Be interested in learning work-related job skills
- Be open to learning, goal-setting, instruction, and feedback
- Be independent with managing your own transportation
- Be able to find your way around a new community without getting lost
- Be able to do fine-motor tasks like putting on gloves or peeling a carrot
- Have appropriate social interactions for the workplace and public interactions
- Be at least 21 years of age
- If you have a legal guardian, your guardian will also need to acknowledge your participation

If you are a **person without a brain injury** interested in helping out, here are the requirements:

- Be interested in learning about brain injury (experience preferred, but not required)
- Be open to learning, goal-setting, instruction, and feedback
- Have experience with baking (home or commercial) or retail sales (preferred)
- Be independent with managing your own transportation
- Be able to work without the need for close supervision
- Be able to do fine-motor tasks like putting on gloves or peeling a carrot
- Have appropriate social interactions for the workplace and public interactions
- Have good attention to detail, organizational skills, and workplace communication
- Be at least 18 years old (parental permission also required if under age 21 years)

Please send completed applications to us electronically at: volunteer@sarahbellumbakery.org or you can drop off a printed copy to our shop during business hours. Thank you!!!

An **Oregon Food Handler's Card** is required for anyone wanting to volunteer with Sarah Bellum's Bakery & Workshop. Even if you are not directly handling our food or beverage products, any staff in the shop needs to be aware of food safety and precautions.

You can complete the training for an Oregon Food Handler's Card online at:
www.orfoodhandlers.com

The training will take about an hour. You can take the quiz as many times as needed to pass. There is a **\$10 fee**. Sarah Bellum's Bakery & Workshop will reimburse you for this fee if needed – please let us know.

When completed, please print a copy of your card and bring it to the shop.
You can also download a PDF copy of your card and email it to us with your application.

The card should look something like this →
Each card / license is good for three years.





Sarah Bellum's Bakery & Workshop
 7828 SW Capitol Highway | Portland, OR 97219
 (978) 249-2870 | info@sarahbellumbakery.org



Volunteer Application

Thank you for your interest in volunteering with Sarah Bellum's Bakery & Workshop. Sarah Bellum's is a non-profit organization that provides job training to support return-to-work opportunities for adults with acquired brain injury through baking and selling our delicious baked goods made with organic ingredients. Volunteers may participate in baking, decorating, cleaning, sales, and other related activities to support the bakery and workshop programs.

Name	
Date of Birth	
Address	
<i>Optional:</i> Pronouns	
<i>Optional:</i> Race/Ethnicity (for data tracking purposes only)	
Best Phone Number	<input type="checkbox"/> Landline <input type="checkbox"/> Mobile
Best Email	
Preferred Communication	<input type="checkbox"/> Email <input type="checkbox"/> Text <input type="checkbox"/> Phone
Brain Injury	Type:
<input type="checkbox"/> N/A	Date:
	Severity:
	Major Challenges:
	Major Strengths:
Baking Experience	
Retail/Sales Experience	
Why are you interested in volunteering with us?	
What are you hoping to get out of this experience?	
How will your strengths contribute to our program?	

Preference for volunteer activities <i>(Check all that apply)</i>	<input type="checkbox"/> Baking <input type="checkbox"/> Cleaning <input type="checkbox"/> Sales <input type="checkbox"/> Social Media <input type="checkbox"/> Artwork	<input type="checkbox"/> Public Relations <input type="checkbox"/> Marketing <input type="checkbox"/> Fundraising <input type="checkbox"/> Bookkeeping <input type="checkbox"/> Grant-writing
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General Availability:

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Baking Shift (10am-2pm)	(no baking)						(no baking)
Retail AM (10am-2pm)		(closed)	(closed)				
Retail PM (2pm-7pm)		(closed)					

What is your primary mode of reliable transportation you will use to get to and from this volunteer experience? <i>(Check all that apply)</i>	<input type="checkbox"/> Tri-Met LIFT <input type="checkbox"/> Tri-Met bus (44 / 45) <input type="checkbox"/> Taxi / Uber / Lyft <input type="checkbox"/> Ride from friend/family <input type="checkbox"/> Bicycle <input type="checkbox"/> My own vehicle (on-street parking) <input type="checkbox"/> Other: _____
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How did you hear about us?

My signature below indicates that:

- The information above is truthful, accurate, and honest.
- You have my permission to contact the above references.
- I consent to volunteer without expectation of payment.

Signature

Date

*If you are under age 21 years, or have a legal guardian, then a parent or legal guardian must also sign and acknowledge your participation as a volunteer:

Printed Name

Signature

Date

Relationship: _____