

## VOLUNTEER QUESTIONNAIRE

NAME: \_\_\_\_\_

HOW LONG HAVE YOU BEEN VOLUNTEERING? \_\_\_\_\_ WITH SSHF? \_\_\_\_\_

SHORT BIO (FAMILY, CAREER, ETC.): \_\_\_\_\_

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HOBBIES/INTERESTS: \_\_\_\_\_

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WHAT MADE YOU DECIDE TO BECOME A VOLUNTEER FOR SSHF? \_\_\_\_\_

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WHAT DO YOU ENJOY MOST ABOUT VOLUNTEERING IN GENERAL AND FOR SSHF?

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WHY DO YOU THINK WHAT SERTOMA SPEECH & HEARING DOES IS IMPORTANT?

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WHAT WOULD YOU LIKE TO SEE SSHF INVOLVED WITH IN THE FUTURE?

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*Thank You*