



Connecticut Association for Human Services

110 Bartholomew Avenue, Suite 4020 | Hartford, CT 06106 | (860)951-2212 | www.cahs.org

Emily Wood, President | John P. Merz, Chief Executive Officer

VITA Volunteer Registration Form

Name:

Mailing Address:

STREET ADDRESS

CITY

STATE

ZIP CODE

Phone Number(s):

Email Address:

Place of Employment:

How long have you been with VITA and what was your role?

(New Volunteers, please specify the role you are interested in)

What Site did you volunteer for and would you like to continue there?

****For New Volunteers, please send us where you are located and we can send you sites near you or if you have a preferred site, please let us know. ** In a Virtual setting, you can volunteer anywhere.**

Volunteering Preference (select all that applies) AND what is your availability (Days and Time)?

This is subject to change at your leisure and depending on the site.

Assisting with Drop-Offs In-Person (If available) Virtual Setting

Days and Time: Su M T W TH F S

**** Due to COVID-19, many sites had to shut down and implement a virtual tax prep process. In an event where we need to go to a full virtual operation, do you have a reliable computer/laptop and internet access? ** YES NO – If Yes, is your Wi-Fi Password Protected YES NO**

Please fill out this form and email back to us at thamilton@cahs.org and jvongxay@cahs.org, while cc: trobenson@cahs.org. Thank you for the opportunity!

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