

# Good Works Initiative Assistance Request

## Personal Information:

Name \_\_\_\_\_ Congregation \_\_\_\_\_

e-mail \_\_\_\_\_ Phone \_\_\_\_\_

Address (if applicable) \_\_\_\_\_

## Good Work Information:

Job Category \_\_\_\_\_ Time Frame \_\_\_\_\_

Estimated time required to complete task \_\_\_\_\_

Location (if different from home address) \_\_\_\_\_

Required skills/materials \_\_\_\_\_

Please write a brief description of the service being requested: