

# COURT MANDATED SERVICE FORM

Buffalo Food Shelf  
Volunteer Coordinator  
Direct: 612-282-4165  
Email: buffalofoodshelfvolunteer@gmail.com



**We can only accept volunteers with non-violent offenses**

Name		Date	
Address		Phone	
City / Zip		Birthdate	
Email			

Emergency Contact Name / Phone:

Name of the Offense	
Brief Description of the Charge	
Number of Service Hours Required	
Date Hours Need to be Completed	
Probation Officer's Name	
Probation Officer's Address	
Probation Officer's Phone	

Are you currently a client of Buffalo food shelf? (Please circle your answer)	YES	NO
--	-----	----

<p><b><u>Statement of Understanding</u></b></p> <p>I verify the information on this application to be true, complete and correct. I agree to support the mission of Buffalo Food Shelf.</p> <p>(Please type name for signature)</p> <p>X_____</p>	<p><b><u>Photo Release</u></b></p> <p>I hereby agree to give Buffalo Food Shelf permission to use photos/videos that may include me for publication or to be kept on file for future publications.</p> <p>(Please type name for signature)</p> <p>X_____</p>
---	--