



IONIA COUNTY
COMMUNITY FOOD NETWORK
Volunteer Survey

It is the mission of the Ionia County Community Food Network to facilitate the development and on-going support of community-grown food sources and related distribution systems in order to provide locally grown, donated fresh produce to county residents in need. Additional goals of the network are to improve the quality of life in Ionia County by providing fresh produce to local residents in need, increase volunteerism & community support, create new opportunities for learning and developing leadership skills throughout our community. To achieve these goals we are collaborating with local community gardens, food pantries, volunteer networks, and area agencies. We are seeking information from you to help us focus on the needs of the community. Please fill out this short questionnaire and return it to the address below.

Basic Information

Organization Name: _____
Contact Person: _____
Address: _____
Phone: _____ Email: _____

Does your organization distribute food? _____ If yes, please answer these questions.

What is your distribution schedule? _____ _____
Average number of people who receive food per month? _____
Can you store fresh produce safely? _____ How long? _____
Do you any special needs that would have to be met in order to distribute fresh produce such as received on a certain day or packaged a particular way? _____ _____
Are you seeking additional volunteers to help with distribution or handling? _____

Does your organization work with volunteers? _____ If yes, please answer these questions.

How many volunteers do you routinely have in one month? _____

Please explain: _____

What is the age range of your volunteers? _____

How many volunteers are assigned to a specific job already? _____

How many volunteers might be available to help at a community garden? _____

How many volunteers might be able to help with transporting produce to points of distribution?

_____ Do they have their own transportation? _____

How many volunteers might be available to help with packaging? _____

How many volunteers might be available to help with distribution? _____

Do your volunteers have a required number of hours to fill? _____

If so, what is the average number of hours required per month? _____

Are there any special needs or concerns that should be considered when matching your
volunteers to locations where they can help? _____

Are there any other special needs or considerations that we should know to better assist your organization? If so, please include them when you return this questionnaire!

Please return your questionnaire to ENRICH of Ionia County by mail or email.

ENRICH of Ionia County
343 W. Main St., Ionia, MI 48846

Phone: 616-522-1126
Email: enrichionia@gmail.com