

Random Acts of Flowers

1. Contact information:
 - a. If you have a particular contact person, please list: **Monica Kok**
 - b. Phone Number: **727-754-7974**
 - c. Email: **monica@rafpinellas.org**
 - d. Website: **www.rafpinellas.org**
 - e. Address: **564 Frederica Lane, Dunedin, FL 34698**

2. Does your organization have 501(c)(3) Status? **Yes**

3. What social issue(s) may students address through community service work at your organization?
Health & recycling

4. Do you have an age/grade requirement for volunteers? **No**
 - a. If yes, please specify: **N/A**

5. What are some typical activities that students might perform if they complete community service hours with your organization? **arranging, deconstructing, delivering flowers and workshop organization**

6. When can students volunteer at your organization?
 - a. Days of the week? **Mon-Fri**
 - b. Typical number of hours per week available/required? **2-4**
 - c. Times they may volunteer? **9-5 call to find out schedule of activities**
 - d. Do you have students volunteer during the summer months? **Yes**
 - e. Do you only offer community service hours during the summer? **No**

7. Please briefly list any additional information that students may need to know about your organization if they are considering you as a community service agency: **Random Acts of Flowers recycles and repurposes flowers by engaging dedicated volunteer teams to deliver beautiful bouquets and moments of kindness to individuals in healthcare facilities across the country.**