



Caring TogetherTM in Hope

APPLICATION FOR VOLUNTEER SERVICES

Date: _____

Services to be provided: _____

This application does not discriminate in securing volunteers based on race, color, religious creed, national origin, sex, or ancestry; or based on age against persons whose age is over 40 or based on handicap or disability and any other characteristic required by law. No question on this form is intended to secure information to be used for such discrimination.

Name: _____
Last First Middle

Address: _____
Street City State Zip Code

Telephone Number: _____ Are you 18 years or older? Yes No
Home Cell

Date of Birth: _____ Social Security Number: _____

Occupation: _____ Employer: _____

Employer Telephone Number: _____ Supervisor: _____

Describe your formal/informal training and experience pertinent to the volunteer services you would provide:

What do you hope to gain from volunteering?

Other organizations to which you have provided volunteer services:

Supervisor: _____ Telephone Number: _____

When are you willing to volunteer? (Days, times, dates)

To Be Completed By All Applicants:

Have you ever been convicted of any criminal offense other than a minor traffic violation fine (\$500 or less) or offenses settled in juvenile court or other youth welfare offender law? Yes No If yes, please explain:

Certifications:

Are you certified in **First Aid?** Yes No **CPR?** Yes No

When Driving is Required

Do you have a valid driver's license? Yes No License Number: _____
Do you currently have vehicle insurance? Yes No

A pre-agreement drug testing may be required as well as random drug and alcohol testing.

References: A minimum of two references checks are required. References must include immediate employer and/or any volunteer positions.

1. _____
Name Occupation Work Phone Home Phone
2. _____
Name Occupation Work Phone Home Phone
3. _____
Name Occupation Work Phone Home Phone

Emergency Information:

Name and phone number of person to be notified in case of accident or emergency?

Name Telephone Number

Volunteer Signature Date