



## Volunteer Application

### Contact Information

Name	
Street Address	
City ST ZIP Code	
Home/Cell Phone	
Work Phone	
E-Mail Address: DOB: Social Security Number:	

### Availability

During which hours are you available for volunteer assignments?

- Weekday mornings       Weekend mornings  
 Weekday afternoons       Weekend afternoons  
 Weekday evenings       Weekend evenings

### Interests

Tell us in which areas you are interested in volunteering

- Administration  
 Events  
 Big Brother/Big Sister  
 Fundraising

Activities within the home

Are you over 21 years of age? \_\_\_\_\_

Have you ever been convicted of a crime? \_\_\_\_\_

Are you willing to have a background check? \_\_\_\_\_

Do you have a valid Driver's License? \_\_\_\_\_ Number/State \_\_\_\_\_

### Special Skills or Qualifications

Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports.

--

### Previous Volunteer Experience

Summarize your previous volunteer experience.

--

### Person to Notify in Case of Emergency

Name	
Street Address	
City ST ZIP Code	
Home Phone	
Work Phone	
E-Mail Address	

### Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

Name (printed)	
Signature	
Date	