



Volunteer Application

Contact Information

| | |
|-------------------------|--|
| Name | |
| Street Address | |
| City, State, & ZIP Code | |
| Home Phone | |
| Work Phone | |
| E-Mail Address | |

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
 Marketing/Advertising
 Fundraising
 Tutoring
 Phone bank
 Mentoring
 Seasonal

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.

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Previous Volunteer Experience

Summarize your previous volunteer experience.

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Person to Notify in Case of Emergency

| | |
|-------------------------|--|
| Name | |
| Street Address | |
| City, State, & 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 | |

Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

If necessary, as a condition of working with children, you may have to submit to a criminal background check.

Thank you for completing this application form and for your interest in volunteering with us.