

Volunteer Application:

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home phone: _____ Cell phone: _____ email: _____

Birthday (mm/dd): _____

Education: _____ Current profession: _____

Emergency Information:

Name: _____ Relationship: _____ Phone: _____

Name: _____ Relationship: _____ Phone: _____

Previous volunteer experience: _____

How did you hear about us? _____

Why did you decide to volunteer with us? _____

What do you think makes you a good fit for volunteering with us? _____

What positions are you interested in? _____

Your availability:

Monday	10am – 1 pm or 2pm – 5pm
Tuesday	10am – 1 pm or 2pm – 5pm
Wednesday	10am – 1 pm or 2pm – 5pm
Thursday	10am – 1 pm or 2pm – 5pm

Have you ever worked or volunteered for our organization? No Yes If yes, when: _____

Have you ever been convicted of a felony? No Yes If yes, explain: _____

Candidate signature: _____ Date: _____

*Please drop off your completed application at the office during open hours. Thank you!