



Volunteer Application Form

Contact Information

Name: _____ Date of Birth: ____/____/____ Phone: _____

Address: _____ City, State, and Zip: _____

Volunteer Position Information

What position are you applying for? (Board, Team, or Volunteer) _____

What skills can you contribute to the organization? _____

What experience do you have in this area? _____

What days will you be available? (List ALL that apply.) _____

What times during these days will you be available? _____

Education/Work Experience

Highest Level of Education: _____ Current Employer: _____

Personal Reference: 1) _____ 2) _____

(Please list name and contact information.)

Professional Reference: 1) _____ 2) _____

Emergency Contact Information

Emergency Contact: _____

Relationship to Contact: _____ Phone: _____

All applicants must answer the following questions. Failure to answer honestly WILL disqualify the applicant from service in ANY position with our organization.

Have you ever been convicted of a felony? YES _____ NO _____

If yes, please describe the conviction in GREAT DETAIL in the space provided:

By signing on the line provided, you agree that ALL information you have provided in this application are to be true to the best of your knowledge.

Signature: _____ Date: _____