

Volunteer Application

Contact Information

Name: _____ Birthdate: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: (____) _____ - _____

E-Mail: _____

Education/Employment Background

Are you currently a student? Yes No

School _____ & _____ Area _____ of _____ Study:

Are you currently employed? Yes No Employer: _____

Employment History: _____

Please list the languages with which you are fluent. _____

Volunteer Information:

List any previous or current volunteer experience. _____

List any Training experience: _____

Why are you volunteering? (I am volunteering to fulfill...)

Service Learning Personal Choice

Availability

Number of hours available to volunteer each week

1-5 5-10 10-15 15+

What days of the week are you available to volunteer?

Sunday Monday Tuesday Wednesday Thursday Friday Saturday Sunday

General Question

How did you hear about H & F Agency? _____

Where/when did you first learn about child abuse/human trafficking/sexual exploitation? _____

Why do you want to serve as a volunteer? _____

Criminal History

Do you have any criminal convictions? Yes No

If yes, please explain. _____

Health Questionnaire

1. Briefly explain any health conditions you would like H & F to be aware of: _____

2. Preferred Hospital in the event of an emergency: _____

Emergency Information

Emergency Contact#1:

Name: _____ Relationship: _____

Contact Phone Number: _____

Emergency Contact #2:

Name: _____ Relationship: _____

Contact Phone Number: _____

Email Completed form to **yking@myhopeandfuture.com**