



Volunteer Application

(Please Print)

Name: _____

Address: _____

Telephone #: (h) _____ (w) _____

May you be called at work? Yes ___ No ___ Social Security #: _____

How long have you lived in _____ County? _____

Date of Birth: _____ Place of Birth: _____

Marital Status: _____

If presently married, give husband's/wife's name and occupation:

Name: _____

Occupation: _____

Children:

Name	Date of Birth	Sex
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Other Members of Household:

Name

Relationship

Do you drive? Yes ___ No ___

Do you have an automobile available to you? Yes ___ No ___

Do you feel you have any physical limitations or health problems that might affect your work? If yes, please explain. _____

YOUR EDUCATION (circle highest completed)

High School: 9 10 11 12 College: 1 2 3 4 Graduate: 1 2 3 4

Major: _____

Degree: _____

Are you presently enrolled in school? Yes ___ No ___

If yes, name of school and course of study: _____

WORK/VOLUNTEER HISTORY (Use another sheet if necessary)

1. Name and Address of present or last employer or volunteer project:

Dates: _____ Supervisor's Name: _____

Brief Description of Work: _____

2. Name and Address of next previous employer or volunteer project:

Dates: _____ Supervisor's Name: _____

Brief Description of Work: _____

3. Name and Address of next previous employer or volunteer project:

Dates: _____ Supervisor's Name: _____

Brief Description of Work: _____

List your other current community activities and membership in clubs, church, other organizations:

Languages Spoken: _____

Hobbies/Special Interests: _____

When would you be available for volunteer service? Check times:

MON__TUE__WED__THUR__FRI__SAT__SUN__

(List times you are available)

Morning_____

Afternoon_____

Evening_____

Approximately how much time can you contribute weekly as a B.A.L.L. Association volunteer?

How many months can you commit to our organization? _____

Do you have any training or experience in any of the following?

- Education
- Counseling/Psychology
- Fundraising
- Advertising or Public Relations
- News Media
- Child Development
- Writing
- Child Care
- Public Speaking
- Art or Graphics
- Sports/Athletics

If you answered yes, please describe: _____

Have you ever been arrested for a crime? Yes ___ No ___

If yes, what charge? _____

Date of Arrest/Disp: _____ Where?

How did you learn about B.A.L.L. Association?

Please explain briefly why you want to volunteer with B.A.L.L. Association.

Ideally, what would you like to gain for yourself in volunteering with us? _____

PERSONAL REFERENCES (If you are employed, one reference should be from your employer. No family members please).

1. Name:

Address:

Telephone #: _____

Relationship:

2. Name:

Address:

Telephone #: _____

Relationship:

3. Name: _____

Address:

Telephone #: _____

Relationship:

In case of emergency, contact:

Telephone #: _____

AFFIRMATION AND RELEASE

I, _____, hereby affirm that all of the answers provided on my volunteer application are true. I hereby authorize B.A.L.L. Association, Inc. to investigate my background to determine my fitness as a potential volunteer.

I understand that the information requested in this application will be used only for the purpose of determining suitability as a B.A.L.L. Association, Inc. volunteer. Further, I understand that after the successful completion of my training, I will be expected to serve a minimum of one year with a B.A.L.L. Association, Inc. program. If unforeseen circumstances prevent me from fulfilling this obligation, I will submit my written resignation to the executive director with as much advance notice as possible.

Name (please print) _____

Signature _____

Date _____