



## VOLUNTEER APPLICATION FORM

Name		Date	
Address		Date of Birth	
City & State		Zip Code	
Home Phone		Work Phone	
Email		Cell Phone	

1. Are you a student? Yes ____ No ____	Currently Employed? Yes ____ No ____
What school do you attend?	Job Title / Position:
What grade / year are you in?	Name of Company / Employer:

2. Why are you interested in volunteering with the YWCA?

  
  

How did you hear about the YWCA?

3. Have you done volunteer work at another non-profit organization? Yes \_\_\_\_ No \_\_\_\_

If yes, where and what did you do?

4. When are you available to volunteer and for how long?

Time of day \_\_\_\_\_ Days of the week \_\_\_\_\_

For how long?

Note: The days and times could alter depending on the program.

Rank	Program	Days	Time
	After school program	Monday through Friday	3:00 PM – 7:00 PM
	Adult Day Service	Monday through Thursday	All day OR 9:00 AM – 12:00 PM OR 12:00 PM – 5:00PM
	Child Care	Monday through Friday	All day OR 9:00 AM – 12:00 PM OR 12:00 PM – 5:00PM
	Moms R Us	Monday & Wednesday	3:00 PM – 6:00 PM
	Computer Lab	Monday through Friday	9:00 AM – 1:00 PM OR 1:00 PM – 5:00 PM
	Maintenance	Monday through Friday	All day OR 9:00 AM – 12:00 PM OR 12:00 PM – 5:00PM
	YW General	Monday through Friday	All day OR 9:00 AM – 12:00 PM OR 12:00 PM – 5:00PM
	Special Events/Projects	Monday through Friday	All day OR 9:00 AM – 12:00 PM OR 12:00 PM – 5:00PM

6. Have you ever been convicted of a felony within the last five years? Yes \_\_\_\_ No \_\_\_\_

If yes, please explain:

7. List 3 employment, business or personal references, including name, address and phone numbers.

### Confidentiality Statement

During my volunteer placement, I acknowledge that I may become aware of confidential information relating to the YWCA staff, partnering agencies and clients. By signing this form I agree to in no way reveal or divulge any such information except if authorized by my supervisor and to report child and/or adult abuse. I also hereby swear that all information I have provided here is accurate and true to the best of my knowledge.

\_\_\_\_\_

Printed Name

\_\_\_\_\_

Signature

\_\_\_\_\_

Date

**Areas of Interest**

*Please check all that apply.*

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Answering Telephone          | <input type="checkbox"/> General Maintenance     | <input type="checkbox"/> Play Piano                     |
| <input type="checkbox"/> Athletic Coach               | <input type="checkbox"/> Grant-writing           | <input type="checkbox"/> Read to Children               |
| <input type="checkbox"/> Bookkeeping                  | <input type="checkbox"/> Handicrafts             | <input type="checkbox"/> Registration                   |
| <input type="checkbox"/> Catering                     | <input type="checkbox"/> Handle Money            | <input type="checkbox"/> Research                       |
| <input type="checkbox"/> Children - Special Education | <input type="checkbox"/> Handwrite Letters/Cards | <input type="checkbox"/> Scrapbooking                   |
| <input type="checkbox"/> Decorating                   | <input type="checkbox"/> Host/Hostess            | <input type="checkbox"/> Serve on Boards/Advisory Panel |
| <input type="checkbox"/> Disabled Adults              | <input type="checkbox"/> Housekeeping            | <input type="checkbox"/> Set up / tear down             |
| <input type="checkbox"/> Donations                    | <input type="checkbox"/> Information Desk        | <input type="checkbox"/> Special Events                 |
| <input type="checkbox"/> Facilitator/Instructor       | <input type="checkbox"/> Mailings Preparation    | <input type="checkbox"/> Tech Instructor                |
| <input type="checkbox"/> Food Bank                    | <input type="checkbox"/> Marketing               | <input type="checkbox"/> Teen Mentor                    |
| <input type="checkbox"/> Friendly Visitation          | <input type="checkbox"/> Media                   | <input type="checkbox"/> Transport Volunteers           |
| <input type="checkbox"/> Games & Crafts with Children | <input type="checkbox"/> Office Filing           | <input type="checkbox"/> Tutor Children                 |
| <input type="checkbox"/> Games & Crafts with Seniors  | <input type="checkbox"/> Phone Calling           | <input type="checkbox"/> Typing                         |
| <input type="checkbox"/> Gardening/Landscaping        | <input type="checkbox"/> Photography             |   |

**List all other skills, hobbies and interests.**

***For YWCA office use only.***

Comments: