



North East Westchester Special Recreation, Inc.

63 Bradhurst Avenue, Hawthorne, New York 10532

914-347-4409

Fax: 914-347-5054

Volunteer Application

(Please use ink and print all information)

Part I - General Information

Name: _____

Address _____ Town: _____ Zip: _____

Phone: _____

Day

Evening

Cell

Employer/School/Organization: _____

Occupation: _____

Are you 18 years or older? _____ Yes _____ No

If no, please provide: Age: _____

If no, please have your parent/guardian sign this form giving you permission to volunteer with us.

Part II – Volunteer Interests/Experience/Certifications

(please check the areas that apply)

- | | | |
|---|--|---|
| <input type="checkbox"/> special events | <input type="checkbox"/> CPR | <input type="checkbox"/> program assistant |
| <input type="checkbox"/> public relations | <input type="checkbox"/> First Aid | <input type="checkbox"/> Special Olympics Coach |
| <input type="checkbox"/> fundraising | <input type="checkbox"/> Lifeguard | |
| <input type="checkbox"/> clerical | <input type="checkbox"/> Water Safety Instructor | |

Are there any assignments you would not consider because of a physical, mental or medical disability? ___yes ___no.

If so, please list assignments and explain _____

Please indicate your availability: weekdays weekends weeknights

(over)

Part III - Background Information

(This section must be completed. All information is confidential)

Do you use illegal drugs? yes no

Have you ever been convicted of a criminal offense? yes no

Have you ever been charged with neglect, abuse or assault? yes no

Has your driver's license ever been suspended or revoked in any state? yes no

Other than above, is there any fact or criminal circumstance involving you that would call into question your handling money or being entrusted with the supervision, guidance, and care of people with disabilities? yes no

If you answered "yes" to any of the above questions, please attach a written explanation.

Please list two references below: *(no relatives please)*

In case of an emergency, who should we contact: _____

I understand that photographs/videos taken at North East may include me and may be used by the agency for promotional purposes and documentation of specific activities.

Signature Date

Parents/guardian signature Date

(This signature is required if you are under 18 years of age)