



Volunteer Application

Name: _____

Address: _____ Town: _____ Zip: _____

Phone: _____ Email: _____

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.

How did you hear about North East?

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:



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 every been charged with neglect, abuse or assault? Yes No

Has your drivers license ever been suspended or revoked in a State? Yes No

Other than above, is there any fact or criminal circumstances 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)*

1	Name	Telephone
	Address	Years Known
	Email	Relationship

2	Name	Telephone
	Address	Years Known
	Email	Relationship

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

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)



Volunteer Application Review

(For North East Staff Only)

Volunteer Name: _____

Volunteer Position Desired: _____

Interviewed by: _____

Reference Checks:

1.) _____

_____ Date: _____

2.) _____

_____ Date: _____

Summary of Interview: _____

Please indicate their availability: Weekdays Weekends Weeknights

Specific Programs: _____

