



**FRIENDLY HOME**  
Because Friends Care.

Personal Use Only:

PPD:

MMR:

COVID:

Orientation:

## VOLUNTEER APPLICATION

**PLEASE PRINT**

Date \_\_\_\_\_

Circle one (Mr., Mrs., Ms., Miss) \_\_\_\_\_ Nickname \_\_\_\_\_

Address \_\_\_\_\_

City, Zip \_\_\_\_\_ Date of Birth: Mo \_\_\_ Day \_\_\_ Yr \_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

E-mail address \_\_\_\_\_

### EMPLOYMENT INFORMATION

Current Employer \_\_\_\_\_ Position Title \_\_\_\_\_

Address \_\_\_\_\_

City, Zip \_\_\_\_\_

Business Phone \_\_\_\_\_ Retired \_\_\_ Yes \_\_\_ No

### SPECIAL SKILLS AND/OR TRAINING

\_\_\_\_\_  
\_\_\_\_\_

### HOBBIES/SPECIAL INTERESTS

\_\_\_\_\_  
\_\_\_\_\_

**What area (s) would you like to volunteer?**

Bingo Assistant

Gift Shop

Outing Escort

Creative Arts Assistant

Musician/Entertainer

Reader

Friendly Visitor

Pet Therapy

Clerical

Transporter (In-house)

Special Events

(Over)

Availability:                      **Weekly**                                      **Monthly**                                      **On Call**

Hours	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Morning							
Afternoon							
Evening							

**EMERGENCY CONTACT INFORMATION**

Name \_\_\_\_\_

Address \_\_\_\_\_ Telephone \_\_\_\_\_

Relationship \_\_\_\_\_

**COMMUNITY INVOLVEMENT**

Please list any professional, religious, civic or honorary organizations that you are currently or have been affiliated with and indicate position within organization. Attach a separate sheet, if necessary.

<u>Organization</u>	<u>Position Held</u>	<u>Years (From – To)</u>

Have you ever been convicted of a crime (other than a traffic violation)?  Yes  No

Please explain: \_\_\_\_\_

Have you ever been removed from any type of employment?  Yes  No

Please explain: \_\_\_\_\_

**PERSONAL REFERENCES**

<u>Name</u>	<u>Address</u>	<u>Telephone</u>

*You have my permission to contact the above people to verify references.*

Your signature \_\_\_\_\_ Date \_\_\_\_\_

**MAILING INFORMATION**

I would prefer all my correspondence to go to  Business Address  Home Address

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\*\*\*\*\*OFFICE USE ONLY\*\*\*\*\*

Date of Interview \_\_\_\_\_

Notes: