



VOLUNTEER APPLICATION

Name _____ Today's Date _____

Address _____

City _____ State _____ Zip _____ Phone _____

School most recently attended: _____

Last Grade completed (if applicable) _____ Date of Birth _____ SSN _____

Email Address _____

Have you ever been convicted of a felony? _____ If so, what was the felony? _____

Please circle the holidays you would be willing to volunteer during: Spring Break, Christmas Break, Thanksgiving Weekend, Summer Break, Labor Day Weekend, Memorial Weekend?

Why do you want to volunteer at The House? _____

How many hours per week would you like to volunteer? _____

What hours are you available and willing to volunteer? (List Below)

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
From	Closed	Closed					
To	Closed	Closed					

If offered a volunteer position, when can you begin volunteering? _____

Getting to Know You:

What is your favorite flavor of Bubble Tea? _____

Who has impacted your life the most and how? _____



Most Recent Employment:

*Company _____ Address _____

Phone _____ Position _____ Supervisor _____

Dates Worked: From _____ to _____ Reason for Leaving _____

*Company _____ Address _____

Phone _____ Position _____ Supervisor _____

Dates Worked: From _____ to _____ Reason for Leaving _____

*Company _____ Address _____

Phone _____ Position _____ Supervisor _____

Dates Worked: From _____ to _____ Reason for Leaving _____

Personal References (please do not use family members)

Name _____ Phone _____ Relation _____

Name _____ Phone _____ Relation _____

Name _____ Phone _____ Relation _____

Do we have permission to contact your current/previous employer? _____

If no, please explain _____

I understand that this position is a volunteer position in able to impact my local community. I agree that no payment for my services is necessary, and I am choosing to volunteer with The House if given the opportunity.

I give permission for my name and photos to be used on The House social media, in advertisements, in newsletters, and other media venues.

I certify that to the best of my knowledge that this information and the statements made by me in this application are correct and complete without omission of any kind whatsoever. I understand that giving incomplete or false information, whether in this application or otherwise, may be cause for discharge at any time during my volunteerism. You are hereby authorized to investigate all the statements made in this application.

Applicant's Signature _____ Date _____