



VOLUNTEER APPLICATION

Applicant Information

Full Name: Last First M.I. Date:

Address: Street Address Apartment/Unit #
City State Zip Code

Phone: Email:

Volunteer position applied for:

Table with 8 columns (Availability, Mon, Tue, Wed, Thu, Fri, Sat, Sun) and 3 rows (Morning, Afternoon, Evening) showing time slots and availability checkboxes.

Education

High School: Location:

Did you graduate? YES NO

College: Location:

Field of Study/Degree: Did you graduate? YES NO

Other: Location:

Field of Study/Degree: Did you graduate? YES NO

Previous Employment or Volunteer Work

Company: _____

Position Title: _____

Location: _____

Dates: _____

Responsibilities: _____

Company: _____

Position Title: _____

Location: _____

Dates: _____

Responsibilities: _____

Company: _____

Position Title: _____

Location: _____

Dates: _____

Responsibilities: _____

References

Name: _____

Relationship: _____

Company: _____

Phone: _____

Location: _____

Name: _____

Relationship: _____

Company: _____

Phone: _____

Location: _____

References – Continued

Name: _____

Relationship: _____

Company: _____

Phone: _____

Location: _____

Additional Information

Please list any special skills, hobbies or interests you believe will assist you in your volunteer duties: _____

Applicant’s Statement and Conditions of Volunteer Position

Please read carefully before signing.

I certify that the information set forth in this application for a volunteer position is true and complete to the best of my knowledge. I understand that if I have given false, misleading or incomplete information in connection with my volunteer application, I may be disqualified from further consideration for a volunteer position, or if already volunteering, I may be dismissed.

I consent to and authorize United General District 304 and its personnel to conduct an investigation into my volunteer, employment and educational history and to contact any and all references. I release all parties and persons connected with any requests for information from all claims, liabilities and damages for whatever reason arising out of the furnishing of such information. If I am employed by United General District 304, I release it from any liability for future references it may provide regarding my work history with United General District 304.

Applicant’s Signature: _____

Date: _____