



## Village Connections Volunteer Application

### Personal Information:

Today's Date: \_\_/\_\_/\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Date of Birth: \_\_/\_\_/\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Email: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

### In case of emergency, we have your permission to contact:

Name: \_\_\_\_\_ Relationship \_\_\_\_\_

Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

### Volunteer opportunities at Village Connections (check all areas of interest):

- |  |  |
|--|--|
| <input type="checkbox"/> Driver*                 | <input type="checkbox"/> Pet Care              |
| <input type="checkbox"/> Friendly Calls          | <input type="checkbox"/> Office Support        |
| <input type="checkbox"/> Friendly Visit          | <input type="checkbox"/> Marketing/Membership  |
| <input type="checkbox"/> Gardening               | <input type="checkbox"/> Computer Assistance   |
| <input type="checkbox"/> Minor Home Maintenance  | <input type="checkbox"/> Yard/snow Maintenance |
| <input type="checkbox"/> Other (describe): _____ |  |

*\*Requires copy of driver's license & car insurance, & clean driving record.*

I am able to perform each of the volunteer opportunities I have checked above.

**How did you hear about Village Connections? (Please check all that apply)**

- I am a Village Connections member     Family/friend     Village Connections website  
 Media/news article

Other website (please identify): \_\_\_\_\_

Other (please identify): \_\_\_\_\_

**I understand the completion of this application does not obligate Village Connections to offer me a volunteer position. In processing my volunteer application, background and DMV checks will be conducted, including my listed references and potentially with former volunteer sites and/or other persons. I hereby grant permission to any school, person, firm or corporation to give Village Connections any relevant information that may be required to arrive at a decision on the status of this application. I release Village Connections, its officers, employees, representatives, and agents, from any and all liability and/or damages incurred by me in accessing or using such information.**

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**Signature**

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**Date**

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**Print name**

**Thank you for applying to the Village Connections volunteer program! Please submit your application to:**

**Village Connections  
588 South Third Street  
Columbus, OH 43215**

**614-226-6567**

[info@villageconnectionsolumbus.org](mailto:info@villageconnectionsolumbus.org)  
[www.villageconnectionsolumbus.org](http://www.villageconnectionsolumbus.org)