



Lutheran Intentional Village - Upper Pinellas (LIV-UP) Volunteer Application

Personal Information:

Today's Date: ___/___/___

Last Name: _____ First Name: _____ DOB: ___/___/___

Address: _____

City _____ State _____ Zip _____ Home phone: _____

Email: _____ * (required) Cell phone _____ * (required)

How long have you lived at this address? ___ years ___ months. Is this your full-time address? ___ yes ___ no

If you have lived at your current address fewer than 7 years, or if you live part of the year at another address, please provide that address:

Address: _____ City _____ State _____ Zip _____

Please list any languages you speak (in addition to English): _____

In case of emergency, we have your permission to contact (you can enter additional emergency contacts on the back of this page):

Name: _____ Relationship _____

Phone: _____ Cell Phone: _____

Email: _____

Volunteer Opportunities at LIV-UP(check all areas of interest): *Drivers must provide a valid driver's license and proof of minimum auto insurance (\$50,000/%100,000).

Committee Member

Friendly Visits

Grocery Trips*

Basic Tech Support

Special Event Planning

Driving to appointments*

Gardening

Handy Person

In-Home Companion

Office help

Pet Care

Reading Aloud

Shopping/Errands*

Home organization

Pet therapy

Occasional work days

Ambassador (new member interview)

Please complete both pages of this application.

I am physically and mentally able to perform each of the volunteer opportunities I have checked above. (Note any exceptions below.)

Personal references - 3 required and please, no relatives. We kindly request you notify your references in advance to inform them about LIV-UP and your interest in volunteering.

1. Name: _____ Phone: _____

Email: _____

2. Name: _____ Phone: _____

Email: _____

Preferred Availability

Day	Morning 8-11	Lunch 11-2	Afternoon 2-5	Evening 5-8	Night 8-11
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					
Saturday					
Sunday					

I certify that the information contained in this application is true and complete to the best of my knowledge. I understand the completion of this application does not obligate LIV-UP to offer me a volunteer position. I understand that in processing my volunteer application, background and DMV checks will be conducted, including my listed references. I hereby grant permission to any school, person, firm or corporation to give LIV-UP any relevant information that may be required to arrive at a decision on the status of this application. I release LIV-UP, its offices, employees, representatives, and agents, from any and all liability and/or damages incurred by me in accessing or using such information.

Signature _____ **Print Name** _____ **Date** _____

Thank you for applying to the LIV-UP volunteer program! Please call 727-378-2186 to schedule an interview or submit your application to the address below.

Lutheran Intentional Village,
PO Box 4367, Clearwater FL 33758
Phone: 727-387-2186