



VOLUNTEER APPLICATION

GENERAL INFORMATION

name		today's date	
birth date	gender	email	
mailing address		city	state zip
cell phone	home phone	church affiliation (if applicable)	
education: <input type="checkbox"/> high school <input type="checkbox"/> some college <input type="checkbox"/> associates degree <input type="checkbox"/> bachelors degree <input type="checkbox"/> graduate degree			
school name			
employment: <input type="checkbox"/> full time <input type="checkbox"/> part time <input type="checkbox"/> self employed <input type="checkbox"/> unemployed <input type="checkbox"/> retired			employer
how did you hear about us?			

TYPE OF SERVICE

service category: <input type="checkbox"/> volunteer <input type="checkbox"/> community service for school credit <input type="checkbox"/> required community service		
volunteer interest: <input type="checkbox"/> sunday nursery (4 - 6 pm) <input type="checkbox"/> once a month <input type="checkbox"/> once every other month <input type="checkbox"/> bible club (4 - 5:30 pm)	<input type="checkbox"/> after school program* Tuesday 3 - 5:30 pm <input type="checkbox"/> after school program* Thursday 3 - 5:30 pm	* The after school program volunteers are asked to serve a minimum commitment of once a week for a semester for the sake of consistency for our students and teachers.

REFERENCES

name	
phone number	relationship to volunteer
name	
phone number	relationship to volunteer

EMERGENCY CONTACT INFORMATION

name		relationship to volunteer
cell phone	work phone	home phone