



VOLUNTEER APPLICATION

NAME _____ DATE _____
LAST FIRST MIDDLE
 STREET ADDRESS _____
 CITY _____ STATE _____ ZIP _____
 PHONE NUMBER: DAY _____ EVENING _____
 E-MAIL ADDRESS _____ Are you 18 years of age or older? Yes No

VOLUNTEER EXPERIENCE

Have you volunteered before? Yes No

IF YES, PLEASE DESCRIBE:

AGENCY NAME _____
 DUTIES _____

SUPERVISOR NAME _____ May we contact as a reference? Yes No
 PHONE _____ EMAIL _____

AGENCY NAME _____
 DUTIES _____

SUPERVISOR NAME _____ May we contact as a reference? Yes No
 PHONE _____ EMAIL _____

WORK EXPERIENCE

LIST ANY WORK EXPERIENCE STARTING WITH YOUR PRESENT OR MOST RECENT JOB.

COMPANY NAME _____

JOB TITLE _____ SUPERVISOR _____

DATES OF EMPLOYMENT: FROM _____ TO _____ May we contact as a reference? Yes No

PHONE _____ EMAIL _____

YOUR JOB DUTIES _____

COMPANY NAME _____

JOB TITLE _____ SUPERVISOR _____

DATES OF EMPLOYMENT: FROM _____ TO _____ May we contact as a reference? Yes No

PHONE _____ EMAIL _____

YOUR JOB DUTIES _____

MORE ABOUT YOU

PLEASE LIST ANY OTHER WORK OR CLUB EXPERIENCES: _____

HOW DID YOU LEARN ABOUT VOLUNTEERING AT HIRED? _____

WHY DO YOU WANT TO VOLUNTEER AT HIRED? _____

Do you know someone who currently works at or is associated with HIRED? Yes No

If yes, who? _____

Please list any skills, languages or additional training you have related to the position for which you are applying:

STUDENTS

SCHOOL CURRENTLY ATTENDING _____

FIELD/AREA OF STUDY _____

Are you volunteering with HIRED for a service learning class? Yes No

If yes, please list the class title and instructor name:

NUMBER OF VOLUNTEER HOURS REQUIRED _____

PARENT/GUARDIAN NAME AND PHONE NUMBER _____

VOLUNTEER ACTIVITIES

I would like to work in the following areas:

- | | |
|--|---|
| <input type="checkbox"/> Resource Room Assistant | <input type="checkbox"/> Workshop/Seminar Presenter |
| <input type="checkbox"/> Connections Assistant | <input type="checkbox"/> Fundraising |
| <input type="checkbox"/> Clerical/Data Entry | <input type="checkbox"/> Other: _____ |

SCHEDULE

How often do you want to volunteer? (hours per week, per month) _____

List the days and times that work best for you: _____

AGREEMENT

The information that I have provided in this application is true and correct to the best of my knowledge. If I am selected to participate in the volunteer program at HIRED I agree to abide by the volunteer program manual and all rights and responsibilities.

SIGNATURE _____ DATE _____