



VOLUNTEER APPLICATION

Name: _____

Date: _____

Address: _____

Home Phone: _____

Date of Birth: _____

(Month) (Date) (Year)

Cell Phone: _____

Email: _____

Education/Work Experience:

Please check all of the following boxes that apply to your work/educational background:

College (circle one): Graduate Full time Part time

Name of institution _____

Major _____

Graduation or anticipated graduation date _____

Employed (circle one): Full time Part time

Employer _____

How long have you been employed there? _____

Job Responsibilities _____

Unemployed (circle one): Retired Out of workforce

Retired/Past Employer _____

Position Held _____

Other work experience, paid or volunteer _____

Why do you want to volunteer?

How did you hear about our volunteer program? _____

Skills, interests or special training: _____

Conviction Record:

Yes No Have you ever been convicted of a felony?

If yes please explain:

Volunteer Availability:

Most shifts are Monday –Friday for 3-4 hours; however, we do have some weekend shifts, flexible hours and evening hours in some departments. Please check the times below that you are available to volunteer:

Shift	Sun	Mon	Tues	Wed	Thurs	Fri	Sat
830am-12pm							
1230pm-4pm							
6pm-9pm							

***You must commit to at least 48 hours a year to remain an active volunteer.**

Volunteer Service Areas: (please circle all areas of interest)

Developmental Training Department
Geriatric Room
Community 360 Program

Vocation Training Center

Residential Homes

Are there any physical limitations that we need to be aware of prior to assigning you to a volunteer position?

Personal Reference: (someone who knows your work habits that is not a relative)

Name: _____

Address: _____

(Street) (City) (Zip)

Phone: _____ **Email:** _____

I hereby affirm that the information on this application is true and complete.

Signature _____

Date _____

Send to:
Friendship House
1718 N 2525th Rd
Ottawa, IL 61350

Or Email to: tonyb@ottawafriendship.com