



# Volunteer Application

Contact Information	
Name	
Street Address	
City, State, Zip Code	
Phone Number	
Alternate Phone Number	
E-Mail Address	

## Availability

During which hours are you available for volunteer assignments?

Mornings 9am-1pm/ Afternoons 1pm-5pm

	Mon	Tues	Wed	Thurs	Fri	Sat	Sun
AM							
PM							

## Interests

Tell us in which areas you are interested in volunteering.

- Clerical
- Community Events
- Field Work/Outreach
- Fundraising
- Deliveries
- Receptionist
- Newsletter Production
- Community Mobilization
- Other: \_\_\_\_\_  
\_\_\_\_\_

## Special Skills or Qualifications

Summarize special **skills** and **qualifications** you have acquired from employment, previous volunteer work, or through activities, including hobbies or extracurricular activities.

### Previous Volunteer Experience

Summarize your previous volunteer activities.

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### Person to Notify in Case of Emergency

Name	
Street Address	
City, State, Zip Code	
Phone Number	
E-Mail Address	

### Felony Conviction

Have you ever been convicted of a felony?  Yes  No

If yes, please describe below including date(s).

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### Confidentiality

FAHASS is committed to keeping the details of our clients confidential. Are you able to uphold this standard, and if so willing to sign a confidentiality agreement?  Yes  No

### Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

Name (printed)	
Signature	
Date	

### Our Policy

It is FAHASS' policy to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability. Thank you for completing this application form and for your interest in volunteering with us.