



VOLUNTEER APPLICATION

Name

Last

First

M.I.

Address

Street

City

Zip

Home Phone _____

Cell _____

E-Mail _____

Work _____

In case of emergency notify: _____

How did you hear about us? _____

Briefly state why you want to volunteer? _____

List your skills, hobbies, community activities or work experience:

List previous volunteer experience and organizations: _____

Do you have any certifications like CPR or First Aide? _____

Are there any physical limitations you have? _____

What hours and days are you available? _____

Have you been convicted of a crime? (do not include traffic violations) please explain:

REFERENCES: Please list two or more references (not relatives) preferably persons who can attest to your ability to work with others in a volunteer capacity:

Name and Address

Telephone #

Relationship

1.

2.

3.

VOLUNTEER AGREEMENT AND AUTHORIZATION

This information is to be used only to assist Second Chance at Life, Inc. in determining qualifications for a position as a volunteer.

I understand that Second Chance at Life, Inc. has my permission to use my name and photographs to promote the organization

I agree to participate in any orientation or training if required.

I authorize all references listed to give you pertinent information, and release all parties from any liability from furnishing this information and allow you to contact my references by phone, e-mail or mail.

I will inform Second Chance at Life, Inc. staff of any previous injuries that may affect my ability to safely complete volunteer tasks, including lifting.

I understand that I must carry my own health insurance. I will not hold Second Chance at Life, Inc. responsible for any unforeseen injuries or problems that may occur on the job.

I understand I may not initiate or engage in any media/public event pertaining to Second Chance at Life, Inc. without the approval of Second Chance at Life, Inc.

I understand that I may be privy to personal information regarding participants and other volunteers. I understand that all personal information is confidential including but not limited to any contact information such as addresses, e-mails, account numbers, phone numbers and that it may not be disclosed to an outside written party or verbal or electronic communication.

I understand I may not photograph or record any participants without approval from Second Chance at Life, Inc. staff.

I understand that a criminal background check and a Secretary of State check may be made, and my references and experience checked. I release my criminal conviction record to Second Chance at Life, Inc.

I understand that I am fully responsible for my actions and their consequences. I will hold neither Second Chance at Life, Inc. nor any of its officers, employees, volunteers, agents or any other person or persons responsible or liable for any injury to myself or damage to my personal property while volunteering at Second Chance at Life, Inc.

I, the volunteer or guardian does hereby release and forever discharge Second Chance at Life, Inc. with my signature below from any claim whatsoever which arise or may hereafter arise in connection with my volunteer activities with Second Chance at Life, Inc

I understand that the terms listed above are not all-inclusive and may be updated as needed.

I hereby agree to serve any and all participants and other volunteers regardless of race, sex, creed, religion or national origin.

I certify all information provided in this application is true and complete. I understand that any false information or omission may disqualify me from further consideration, and may result in my removal if discovered at a later date.

Signature of applicant: _____ Date: _____

DOB: _____

Social Security #: _____

Drivers License #: _____

Please list (if any) restrictions on your drivers license:

IF VOLUNTEER IS UNDER 18 YEARS OF AGE, A PARENT OR LEGAL GUARDIAN MUST PROVIDE WRITTEN CONSENT BEFORE VOLUNTEER ASSIGNMENT IS ABLE TO BEGIN.

Print Name of Parent or Legal Guardian

Second Chance at Life does not discriminate against race, national origin, religion, gender, sexual orientation, age, disability or marital status.