



Office use only:
<input type="checkbox"/> Folder
<input type="checkbox"/> BG
<input type="checkbox"/> Orientation
Date Started: _____

VOLUNTEER APPLICATION

Date: _____ Name (First, Middle, Last): _____
 DOB: ___/___/___ Social Security #: ___/___/___ Driver's License (State & #) _____
 Local Address: _____ City: _____ State: ___ Zip: _____
 Local Phone: (____) _____ Cell Phone: (____) _____
 Permanent Address: _____ City: _____ State: Zip: _____
 Permanent Phone: (____) _____ Email: _____
 Emergency Contact: _____ Phone: (____) _____

Please mark which site you would like to volunteer with, if there is no preference, leave blank:
 Kid City Mountain View Southside Keystone Kids In Action (KIA) 5:30-8pm
 Summer

Please mark your available times to volunteer, if there is no preference in time, leave blank:

	Monday	Tuesday	Wednesday	Thursday	Friday
AKC 3:00-5:30	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
KIA 5:30-8:00	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Summer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Church, School, or Organizational Affiliation: _____ Hours needed: _____
 List previous experience, if any, working with children: _____
 List any special skills that you have: _____

How did you hear about our organization _____

Briefly describe your personal faith and reason for wanting to participate in this ministry:

Do you feel as though you have a personal relationship with God? How do you know?

If not, would you like someone to talk to you about how you can know for sure? _____

Volunteering to complete a Community Service Sentence? Yes or No Hours needed _____
 Have you ever been convicted of a felony or misdemeanor? Yes or No If yes, please explain _____
 Probation Officer Name: _____ Phone #: _____

"I verify that all information given to me in this application is true. I authorize a complete reference and background check. By my signature below, I authorize inquiry with regard to my character of any and all personal and agree to hold such persons harmless with respect to any information that we may give."

Signature: _____ Date: _____

C4K Staff: _____ Date: _____