THE FAMILY TREE

INFORMATION, EDUCATION & COUNSELING CENTER



Volunteer Application

Name:		
Prefix (Dr./Mrs./Mr./Ms.) First	Middle	Last
Mailing Address:		
City:	State:	Zip:
Preferred Phone: Cell Home		
Email Address:		
Date of Birth (year optional):		
Employer/Name of School (if student):		
Occupation:		
List any previous volunteer experience, employment, participation in community service organizations, hobbies, skills or interests that would be helpful with your volunteer work:		
Can you speak, read, or write a language other than English? 🗌 No 🗌 Yes:		
Person to contact in case of emergency:		
Name: Relationship:		
Preferred Phone: Cell Home		
References (non-relatives):		
1. Name: Relationshi	p:	Phone Number:
2. Name: Relationshi	p:	Phone Number:
Please check The Family Tree volunteer activities in which you are most interested:		
General Support Administrative Marketing/Special Events/Fundraising		
Other:		
Day(s) and Time(s) available to volunteer (specify times):		
Anticipated length of service: 6 months 1 year 1 Indefinite 0 Other:		
Have you ever been convicted of a crime other than a minor traffic offense?		
I understand that any falsification of the information provided above may prohibit my activities as a volunteer.		
Circoture		
Signature: Date:		