



Girls Incorporated of St. Louis Volunteer Application

Application Date _____

Volunteer Position Sought _____

Name _____

Home Address _____

Cell Phone _____ Home Phone _____

EMERGENCY CONTACT INFO

Primary Emergency Contact _____

Secondary Emergency Contact _____

Home/Work Phone _____ Cell Phone _____

Home/Work Phone _____ Cell Phone _____

Address _____

Address _____

City, State, Zip Code _____

City, State, Zip Code _____

EDUCATION

Highest Level of Education _____

EMPLOYMENT

Current Employer, if applicable:

Position/Title _____

Dates of Employment (starting, ending) _____

Company/Employer _____

Address _____

Dates of Employment (starting, ending) _____

Company/Employer _____

Would you like us to keep your employer abreast of your volunteer service and achievement? No Yes

SKILLS & EXPERIENCE

Special training, skills, hobbies _____

Groups, clubs, organizational membership's _____

Special certifications such as First Aid training, CPR, etc. _____

Please describe your prior volunteer experience (include organization names and dates of service)

What experiences have you had that may prepare you to work as a volunteer in the field of [description of field, e.g., domestic violence, child abuse prevention, youth recreation, etc.]?

Why do you want to volunteer? [Or, What do you want to gain from this volunteer experience?]



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What hours are you most available? How many volunteer hours are you looking to obtain?

Have you ever been convicted of a crime? [If yes, please explain the nature of the crime and the date of the conviction and disposition.] Conviction of a crime is not an automatic disqualification for volunteer work.

MEDICAL

List any allergies or special health concerns that we may need to be aware.

Do you have any physical limitations?

REFERENCES

Please list three people who know you well and can attest to your character, skills, and dependability. Include your current or last employer.

Name/Organization	Relationship to you	Length of relationship	Phone number

Please read the following carefully before signing this application:

I understand that this is an application for and not a commitment or promise of volunteer opportunity. I certify that I have and will provide information throughout the selection process, including on this application and in the interviews that is true, correct and complete to the best of my knowledge. I certify that I have and will answer all questions to the best of my ability and that I have not and will not withhold any information that would unfavorably affect my application for a volunteer position. I understand that information contained on my application will be verified by Girls Inc. of St. Louis.

I understand that misrepresentations or omissions may be cause for my immediate rejection as an applicant for a volunteer position or my termination as a volunteer.

Signature _____ Date _____