

RDVIC VOLUNTEER APPLICATION FORM



Name: <small>first</small>		<small>Last</small>		Date:	__/__/__														
Address:																			
City:			State:		Zip:														
Telephone: ()			E-mail:																
Date of birth:																			
EDUCATION (Circle last year completed):																			
Grade	5	6	7	8	High School	9	10	11	12	College	1	2	3	4	Graduate	1	2	3	4
Previous work experience:																			
Are you presently employed?			Yes:		No :														
			If yes, Full-time:		Part-time:														
Duties:																			
Employer's name:			Telephone: ()																
May we contact you at work if necessary?			Yes:		No:														
Note:																			
What kind of volunteer positions are you most interested in now?																			
Special skills, training, interests, or hobbies:																			
Previous or present volunteer jobs:																			
Time you have available for volunteer work:			Hours per month:																
Any preferred days/hours?																			
Motivation to volunteer at RDVIC:																			
Source of referral to RDVIC:																			
Do you have a car with adequate insurance and would you be willing to transport clients as part of your volunteer work?																			
			Yes:		No:														
I certify that the information contained above is true and correct to the best of my knowledge.																			
Signature			Date		__/__/__														
For office use only																			
Interview by:																			
Comments:																			
Application:		Approved		Denied															
				Denied until															
Signature			Date:		__/__/__														