

HeartLove Place Volunteer Application

The information contained in this application will be disclosed only to those who have a genuine need to know in order to carry out their responsibilities at HeartLove Place or as required by law.

Personal

Full Name _____ Date of Birth _____

Address _____ City _____ Zip _____

Home Phone _____ Message Phone _____

Best time to call: Morning _____ Afternoon _____ Evening _____

Occupation _____

How did you hear about HeartLove Place?

What volunteer possibilities are you interested in at HeartLove Place?

Personal Interest and Experience

Please describe any hobbies, skills or special interests you may have that can enhance your volunteer experience:

Please list any previous volunteer experience:

Where?	What did you do?	How long?
_____	_____	_____
_____	_____	_____
_____	_____	_____

Describe any experience you have working with the age group for which you are applying:

List Three Personal References (No relatives)

Name _____ Nature of association _____

Address _____ Phone Number _____

Name _____ Nature of association _____

Address _____ Phone Number _____

Name _____ Nature of association _____

Address _____ Phone Number _____

I am available:

Once per week _____ Twice per week _____ other _____

Once per month _____ Twice per month _____ other _____

Special Events (Please list interest)

Authenticity and Authorization

I authorize HeartLove Place or its representatives to make any and all appropriate inquires regarding my background such as criminal record check, personal reference check and previous volunteer contacts. I release HeartLove place and its representatives from any liability, which may result from such actions.

The information included in the application is correct to the best of my knowledge.

If I am selected to volunteer I understand and agree to abide by all HeartLove Place Policies and Procedures.

You name _____ Date submitted _____

(Printed)

Signature _____ Date _____

(Upon interview or in person submission)

