

DATE: \_\_\_\_\_

# Volunteer Application

## Contact Information

Name			
Street Address			
Daytime Phone			
E-Mail Address			
Emergency Contact		Phone	

## Desired Schedule

During which hours are you available for volunteer assignments? Check all that apply

<input type="checkbox"/>	Monday	<input type="checkbox"/>	Friday	<input type="checkbox"/>	Morning (9am to noon)
<input type="checkbox"/>	Tuesday	<input type="checkbox"/>	Saturday	<input type="checkbox"/>	Afternoon (noon to 4 pm)
<input type="checkbox"/>	Wednesday	<input type="checkbox"/>	Sunday	<input type="checkbox"/>	Evening (3 pm to 7 pm)
<input type="checkbox"/>	Thursday	<input type="checkbox"/>		<input type="checkbox"/>	Other _____
Frequency of volunteer availability? (e.g., weekly, semi-weekly, monthly)					

## Previous Volunteer Experience

Summarize your previous volunteer experience, include organization, position, supervisor phone/ email

## Employment

Include most recent employment information

## How would you like to help?

## Education/Credentials

School	Date	Degree	Location

## References (please give name, address and phone/email of 2 non-family members)


**Agreement and Signature**

By submitting this application, I agree to make a commitment for 6 months or more.

I further understand this is not an offer of employment (paid or volunteer) and in no way obligates MHH to such. Convictions of violent crimes, sex offenses and arson may disqualify you from this opportunity.

*By typing your name on the signature line below you are agreeing that the foregoing information is true and correct. A physical signature may still be required prior to approval as volunteer.*

Name (printed)	
Signature	
Date	

**Our Policy**

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability. A background check will be required.

Thank you for completing this application form and for your interest in volunteering with us.

Reviewed by: \_\_\_\_\_ Date: \_\_\_\_\_

**FOR STAFF USE ONLY**

Comments:

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Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

Volunteer Training Dates: \_\_\_\_\_

Comments:

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Live Scan Completed	Y	N	Results Attached	Y	N	Food Handlers Cert	Y	N
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Start Date: \_\_\_\_\_ Hours: \_\_\_\_\_ Days: S M T W TH F S

# Volunteer Agreement

The volunteer agreement is intended to ensure an understanding between volunteer managers and volunteers of the position description and the organization's policies and procedures.

## Volunteer Agreement

### AGENCY:

We, \_\_\_\_\_ (agency name), agree to accept the services of \_\_\_\_\_ (volunteer name) beginning \_\_\_\_\_ (date).

And we commit

1. To provide accurate information, training, and assistance
2. To ensure supervision and provide job assessment and feedback
3. To respect the skills of the volunteer

### VOLUNTEER:

I, \_\_\_\_\_ (volunteer name), agree to serve as a volunteer and commit

1. To perform volunteer duties to the best of my ability
2. To follow agency rules, policies, and procedures, including recordkeeping requirements and confidentiality of agency and client information
3. To meet time and duty commitments or to provide adequate notice so that alternate arrangements can be made

\_\_\_\_\_  
Volunteer

\_\_\_\_\_  
Staff Representative

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date