

Sarah's House of Maine 346 Main Rd. Holden, Maine 04429 (207) 989-1683

VOLUNTEER APPLICATION

Name		Date			
Other Names					
Address	City	State Zip			
Home Phone	Cell				
Email					
Emergency Contact Information					
Name	Phone				
Employment					
Current Employer	Occupation				
Employer Address					
Work Phone	May we contact you at work?				
<u>Student</u>					
Are you attending school?	ou attending school? Name of School/College				
Will you receive credit for your volun	teer work?				
What is the length of time needed to	fulfill your volunteer red	quirement?			
Volunteer Information/Choice of	of Volunteer Jobs:				
Please describe any experience that n	nay have influenced you	r decision to volunteer at Sarah's House:			
Volunteer Activities:					
Special skills, training or hobbies:					

<u>Availability</u>

Please indicate yo	ur preferred da	y (s):		
Monday	Tuesday	Wednesday	Thursday	Friday
Please indicate yo	ur preferred shi	ift:		
8:30am – 1	11:30am — 2:30pm — 5:30pm			
References (No re	<u>latives , please)</u>			
Name		Relationship		
Address		Phone		
Name		Relationship		
Address		Phone		
Yes No I understand the ir to the best of my k listed and to condu	n convicted of, If yean If y	s, please explain is volunteer com e Sarah's House eck, including cr	the nature, ti nmitment and of Maine per iminal and sex	y misdemeanor or felony offense? me, place and disposition of the case: have answered the questions honestly and mission to check the references I have kual offender background checks. aber: are required to
conduct the backg				
Signature:			Date	
Applicants under a	age 18 must hav	ve this application	on signed by a	parent or legal guardian.
This applicant has under 18 years of a				It is also understood that all volunteers
Parent or guardian	name (please p	orint)		
Signature		Date		