



# VOLUNTEER APPLICATION



Name \_\_\_\_\_ Birthdate \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Home Phone \_\_\_\_\_ Cell \_\_\_\_\_  
 Email \_\_\_\_\_ Employer or School \_\_\_\_\_

Welcome to our Volunteer Program! How did you hear about us? \_\_\_\_\_

How long do you plan to volunteer? Long term \_\_\_\_\_ OR Short term \_\_\_\_\_

What days are you available? What time?

Mon	Tue	Wed	Thur	Fri	Sat	Sun

Areas you're interested in volunteering - please check ALL that apply

- Friendly Visits       Activities Assistance       Dining Room       Transportation/Driving
- Music       Staff Assistance       Friendly Pet Visits
- Spiritual Support       Computers       More-than-a-meal (feeding assistance program)

List specific hobbies/interests you're interested in (for example: playing cards, reading with residents, etc.)

\_\_\_\_\_

Skills & Relevant experience (musical instruments, other languages, etc.)

\_\_\_\_\_

Have you ever been convicted of any felony?  Yes  No

If yes, please explain where, when & disposition \_\_\_\_\_

(Conviction will not automatically bar you from volunteering for most Lytton Gardens activities).

Emergency Contact Name \_\_\_\_\_ Phone \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Parent Signature (if under 18) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_



----- FOR OFFICIAL USE ONLY -----

Type of Volunteer    Com    Res    Yth

Start Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_      End Date? \_\_\_\_ / \_\_\_\_ / \_\_\_\_