



Human Resources
1083 Waterloo Geneva Road
Waterloo, New York 13165
315-539-5067 (phone)
315-539-3735 (fax)

Human Resources
1521 Clark St. Road
Auburn, NY 13021
315-612-0100 (phone)
315-255-3618 (fax)

VOLUNTEER SERVICE APPLICATION

NAME (please print) _____

HOME ADDRESS _____

HOME PHONE: _____ WORK PHONE: _____

DRIVER'S LICENSE: ___ YES ___ NO License ID# _____

OCCUPATION: _____

IN CASE OF EMERGENCY NOTIFY:

Name: _____ Phone: _____

Address: _____

EDUCATION/SPECIAL TRAINING: _____

IF YOU ARE VOLUNTEERING FOR CREDIT, PLEASE ANSWER:

Name of school: _____ Hours Required: _____

Name of Instructor: _____ Phone: _____

HOBBIES/SPECIAL INTERESTS: _____

DO YOU HAVE ANY MEDICAL OR PHYSICAL LIMITATIONS? ___ YES ___ NO

Specify: _____

HAVE YOU EVER BEEN CONVICTED OF A CRIME? ___ YES ___ NO

If yes, date of conviction: _____

Nature of offense: _____

(A conviction is not an automatic bar to serving, each case is considered individually.)

HOW DID YOU HEAR ABOUT ARC? _____

WHY DO YOU WANT TO VOLUNTEER? _____

WHAT TYPE OF WORK ARE YOU MOST INTERESTED IN?

- | | |
|--|--|
| <input type="checkbox"/> Advocacy | <input type="checkbox"/> Instruction Aide |
| <input type="checkbox"/> Carpentry, Painting, Yard | <input type="checkbox"/> Recreation |
| <input type="checkbox"/> Cooking, baking | <input type="checkbox"/> Religious Liaison |
| <input type="checkbox"/> Fund Raising | <input type="checkbox"/> Sewing, Mending |
| <input type="checkbox"/> Housekeeping | <input type="checkbox"/> Special Olympics |
| <input type="checkbox"/> Office Work | <input type="checkbox"/> Other |

NUMBER OF HOURS YOU WISH TO WORK PER WEEK: _____

DAYS PREFERRED: _____ a.m. ____ p.m. ____

PLEASE GIVE TWO REFERENCES OTHER THAN RELATIVES:

Name: _____

Address: _____

Telephone: _____

Name: _____

Address: _____

Telephone: _____



I certify that I have read, discussed, and fully understand the above and that all statements made on this application are true. I understand that any untrue statement may be grounds for termination of volunteer service.

SIGNATURE: _____ DATE: _____

INTERVIEWER: _____ DATE: _____