

**SAFE SANCTUARIES
VOLUNTEER APPLICATION**

Name (First, middle, maiden, last): _____

Address: _____

Daytime phone: _____ Evening phone: _____

E-mail address: _____

Occupation: _____

Employer: _____

Current job responsibilities and schedule: _____

Previous work experience: _____

Previous volunteer experience: _____

Special interests, hobbies, and skills: _____

How many hours per week are you available to volunteer? _____

Are you available: _____ Days _____ Evenings _____ Weekends

Can you make a one-year commitment to this volunteer role? _____

Do you have your own transportation? _____

Do you have a valid driver's license? _____

Do you have liability insurance? (list policy limits and name of carrier) _____

Why would you like to volunteer with children and/or youth? _____

What qualities do you have that would help you work with children and/or youth? _____

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Describe your parents' discipline style: _____

Describe your own discipline methods: _____

Have you ever been charged, arrested, convicted of, or pled guilty to a crime, either a misdemeanor or a felony (including but not limited to drug-related charges, child abuse, and other crimes of violence, theft, or motor vehicle violations)? _____ No _____ Yes

If yes, please explain fully: _____

Have you ever been exposed to an incident of child abuse or neglect? _____ No _____ Yes

If yes, how did you feel about the incident? _____

Would you be available for periodic volunteer training sessions? _____ No _____ Yes

References: Please list three personal references (people who are not related to you by blood or marriage) and provide complete contact information for each. *References are confidential.*

1. Name: _____

Address: _____

Daytime phone: _____ Evening phone: _____

Relationship to reference: _____

2. Name: _____

Address: _____

Daytime phone: _____ Evening phone: _____

Relationship to reference: _____

3. Name: _____

Address: _____

Daytime phone: _____ Evening phone: _____

Relationship to reference: _____

Signature of applicant: _____ Date: _____