



## VOLUNTEER APPLICATION

*All information will be kept strictly confidential*

Name: \_\_\_\_\_ SSN: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Home Telephone: \_\_\_\_\_ Cell: \_\_\_\_\_

Work Telephone: \_\_\_\_\_ Email address: \_\_\_\_\_

Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

Are you currently in school: ( ) Y ( ) N If yes, Major/Degree \_\_\_\_\_

Marital Status: \_\_\_\_\_ Spouse Name: \_\_\_\_\_

Children/ages: \_\_\_\_\_

Do you drive? ( ) Y ( ) N Driver's License Number: \_\_\_\_\_

Car Insurance Carrier: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Relationship to you: \_\_\_\_\_

Previous Volunteer Experience? ( ) Y ( ) N If so, with whom? \_\_\_\_\_

Was your experience successful? Describe: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you fluently speak any other languages? \_\_\_\_\_

What compels you to work for a domestic violence agency? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What if any experience have you had with domestic violence? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What qualities do you possess that would make you a good volunteer? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What experience have you had in handling others in crisis? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What experience have you had with people whose values differ from yours? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever been arrested? ( )Y ( )N If so, when and for what? \_\_\_\_\_  
\_\_\_\_\_

What hours are you able to volunteer? \_\_\_\_\_

What do you think you would like to do at our agency? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Is there anything else we should know about you? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I certify the information contained in this application is true, correct, and complete.

**Signature of Applicant** \_\_\_\_\_

**Date** \_\_\_\_\_