

Volunteer Application

Application Date: _____

Clearance Date: _____

Name: _____ Date of Birth: _____

Address: _____ Email: _____

City: _____ State: _____ Zip: _____

Home Phone #: _____ Cell Phone #: _____

Notify in Case of Emergency: _____ Phone: _____

(The SRKH does not discriminate based on a person's race, religion, age, sex, national origin, disability or marital status regarding volunteer opportunities. This information is for reporting purposes only)

Race (please circle one): African American Caucasian Asian Hispanic Other _____

Marital Status _____ # of Children _____ Ages: _____

- What areas are you interested in? (Please **circle** each area in which you would be willing to volunteer)

Reception/Family Greeter

Fundraising/Special Events

Lowe's Clothes Closet

Organize/sort clothing (when needed)

- Volunteer Availability In-House Volunteers @ Santa Rosa Kid' House are appreciated during the following hours: Monday-Friday shifts are 9 am-1 pm, 1 pm-5 pm but will absolutely take any shift you can do.

- When would you like to volunteer? **YES, you can sign up for more than ONE shift.**

Mondays: _____ until _____

Thursdays: _____ until _____

Tuesdays: _____ until _____

Fridays: _____ until _____

Wednesdays: _____ until _____

Education:

Work Experience:

Computer skills: On a scale of 1-5 (1 being not familiar, 5 being Excellent) please rate your proficiency with these computer applications:

___ Word ___ Excel ___ Publisher ___ Access ___ Internet

Prior Volunteer Experience:

Why would you like to volunteer with the Santa Rosa Kids House?

Have you ever experienced any abuse? If yes, please explain.

Have you ever been convicted of any charges other than minor traffic violations? If yes, please explain.

Please list three references with telephone numbers:

I agree that any information I gain as a result of participating in a Santa Rosa Kids House program or activity will be held in strict confidence.

Sign: _____ Date: _____

Due to the confidential and sensitive nature of our work, all volunteers must complete a background check. Your driver's license # and state is required for this check.

Driver's License # and State: _____

In connection with my volunteer application, I hereby authorize release to the Santa Rosa Kids House any and all information concerning my criminal history, personal background and any other information which may be beneficial in determining my qualifications and fitness for the volunteer position(s) for which I am applying.

Sign: _____ Date: _____

Please return this application to:

Santa Rosa Kids' House
5643 Stewart Street
Milton, FL 32570
Fax: 850-623-1219
Narissag@srkidshouse.org