



Girls Incorporated of St. Louis Volunteer Application

Application Date _____

Volunteer Position Sought _____
Name _____
Home Address _____
Cell Phone _____ Home Phone _____

EMERGENCY CONTACT INFO

_____		_____	
Primary Emergency Contact		Secondary Emergency Contact	
_____	_____	_____	_____
Home/Work Phone	Cell Phone	Home/Work Phone	Cell Phone
_____		_____	
Address		Address	
_____		_____	
City, State, Zip Code		City, State, Zip Code	

EDUCATION

Highest Level of Education _____

EMPLOYMENT

Current Employer, if applicable:
Position/Title _____
Dates of Employment (starting, ending) _____
Company/Employer _____
Address _____
Dates of Employment (starting, ending) _____
Company/Employer _____
Would you like us to keep your employer abreast of your volunteer service and achievement? No Yes

SKILLS & EXPERIENCE

Special training, skills, hobbies _____
Groups, clubs, organizational membership's _____
Special certifications such as First Aid training, CPR, etc. _____
Please describe your prior volunteer experience (include organization names and dates of service)

What experiences have you had that may prepare you to work as a volunteer in the field of [description of field, e.g., domestic violence, child abuse prevention, youth recreation, etc.]?

Why do you want to volunteer? [Or, What do you want to gain from this volunteer experience?]





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What hours are you most available? How many volunteer hours are you looking to obtain?

Have you ever been convicted of a crime? [If yes, please explain the nature of the crime and the date of the conviction and disposition.] Conviction of a crime is not an automatic disqualification for volunteer work.

MEDICAL

List any allergies or special health concerns that we may need to be aware.

Do you have any physical limitations?

REFERENCES

Please list three people who know you well and can attest to your character, skills, and dependability. Include your current or last employer.

Name/Organization	Relationship to you	Length of relationship	Phone number

Please read the following carefully before signing this application:

I understand that this is an application for and not a commitment or promise of volunteer opportunity. I certify that I have and will provide information throughout the selection process, including on this application and in the interviews that is true, correct and complete to the best of my knowledge. I certify that I have and will answer all questions to the best of my ability and that I have not and will not withhold any information that would unfavorably affect my application for a volunteer position. I understand that information contained on my application will be verified by Girls Inc. of St. Louis.

I understand that misrepresentations or omissions may be cause for my immediate rejection as an applicant for a volunteer position or my termination as a volunteer.

Signature _____ Date _____

