



## VOLUNTEER APPLICATION

Thank you for your interest in volunteering at the Jeffco Action Center!

Name \_\_\_\_\_

Birthday (month, day) \_\_\_\_\_

Street Address \_\_\_\_\_

Church Affiliation (optional) \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

Emergency Contact & Phone # \_\_\_\_\_

Phone # \_\_\_\_\_ Cell \_\_\_\_\_

Reference Name & phone # \_\_\_\_\_

E-mail \_\_\_\_\_

Work Experience (briefly describe or attach resume)

Education

Interests and Hobbies:

Type of Volunteer Work Desired:

Please indicate the day(s) and times you are available.

Morning: Monday\_\_\_\_ Tuesday\_\_\_\_ Wednesday\_\_\_\_ Thursday\_\_\_\_ Friday\_\_\_\_

Afternoon: Monday\_\_\_\_ Tuesday\_\_\_\_ Wednesday\_\_\_\_ Thursday\_\_\_\_ Friday\_\_\_\_

Evenings and weekends only \_\_\_\_\_ Special events only \_\_\_\_\_

Can you give us a commitment of six to twelve months? \_\_\_yes \_\_\_no

How did you hear about volunteering at JAC? \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_