

# Volunteer Application



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

Office Use Only:

\_\_\_\_\_ Application Received

\_\_\_\_\_ Contacted for Orientation

**Name:** \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Main Phone #: \_\_\_\_\_ Alternate Phone #: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Place of Employment: \_\_\_\_\_

Profession: \_\_\_\_\_

## **Emergency Contact Information:**

Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

## **Volunteer Information**

### **Are you volunteering to fulfill an organizational, class, or degree requirement?**

Yes  No

### **When would you prefer to volunteer?**

Weekdays  Evenings  Weekends  How many hours per visit? \_\_\_\_\_

**Would you be willing to volunteer on a regular basis? \_\_\_\_\_ If so when?**

Weekly  Monthly  Quarterly  How many hours per visit? \_\_\_\_\_

### **What areas of volunteering interest you?**

- Crisis Center
- Sexual Assault Response Advocate ( SARA's require an additional training of 40 hours)
- My Sister's Closet (Thrift Store)
- Board of Directors
- REFLECTIONS Halfway House
- General Office/Maintenance
- Youth Programs (Girl Power!)

### **How did you hear about the YWCA Enid?**

\_\_\_\_\_  
\_\_\_\_\_

**Why do you want to volunteer for the YWCA Enid?**

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**What skills, training or knowledge do you wish to utilize at YWCA Enid?**

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**Are you bilingual? Yes        No        If yes, language(s): \_\_\_\_\_**

**Personal History – IMPORTANT**

**Have you been convicted of a felony within the past five years?        Yes        or        No**

**If YES, please explain:**

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**Have you experienced a serious trauma in your lifetime?        Yes        or        No**

**If YES, do you fear this could interfere with your work here?        Yes        or        No**

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*I give consent to YWCA Enid to verify any information on this form and to contact persons listed as references. I understand that there are screening and training procedures involved in becoming a volunteer and I am willing to participate. I hereby attest that the above information is true to the best of my knowledge.*

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Signature

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Date

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Parent or Guardian signature if under 18 years old