



Site Location _____

2017 Volunteer Application

PLEASE PRINT CLEARLY

APPLICANT INFORMATION

Name: _____ M / F
Last _____ First _____ Middle _____ Date of Birth _____
Gender (circle one)

Former Name(s) / Maiden Name / Alias(es): _____

Address: _____
Street Address _____ Apartment/Unit # _____

City _____ State _____ ZIP Code _____

Primary Phone: _____ Hm / C / Wk / O _____ Alt Phone: _____ Hm / C / Wk / O _____
Number _____ Type (circle one) _____ Number _____ Type (circle one) _____

E-mail: _____ Contact Preference: Phone E-mail
for Ruby's Pantry communications only (please check one)

Emergency Contact: _____
Name _____ Relationship _____

Emergency Ph: _____ Type: Hm / C / Wk / O _____ Alt Ph: _____ Type: Hm / C / Wk / O _____

I. Have you ever been convicted of a felony? Yes No

If yes, explain: _____

II. Are you completing volunteer hours Yes No School / Youth Group / Other
for community service? *Court Mandate

If court mandated, please state nature of offense: _____ # Hours: _____

*Ruby's Pantry has restrictions on types of court-mandated volunteers it can accept. You will need to provide documentation of cause before orientation. Documentation of hours completed will not be provided without this paperwork. Ruby's Pantry is required to run a background check on all volunteers.

EXPERIENCE & RESTRICTIONS

Please list any of the following that may apply

Experience / Skills: _____

Medical / Physical Restrictions: _____

DISCLAIMER & SIGNATURE

Yes I grant full permission for Home and Away Ministries/Ruby's Pantry to use any photographs, film, video or audio tapes of me performing
 No volunteer work for any purpose Ruby's Pantry deems appropriate.

I agree and **WILL NOT** hold Ruby's Pantry/Home and Away Ministries, Inc., their agents or representatives liable for injury or other damages incurred as a result of the job duties given to me as a volunteer. Though thoughtfully assigned, I understand that the final judgment of physical limitations per assignment is solely my responsibility. All food and/or items used for distribution are for donation purposes and/or the property of Ruby's Pantry and host site. I further agree to keep confidential all guests of Ruby's Pantry.

X

Volunteer Signature _____ Date _____

X

Parent/Guardian (for youth 17 yrs. & younger) _____ Date _____

Accepted and verified by Ruby's Pantry Staff _____

Date _____