

3309 Granby St
Norfolk, VA 23405

ACCESS

Office-757-640-0929
fax- 757-622-8932

Volunteer Application

Date _____

NAME _____ M ___ F ___

ADDRESS _____ CITY _____ ZIP _____

TELEPHONE (H) _____ (W) _____ (Cell) _____

E MAIL ADDRESS _____

EMPLOYER _____ May we contact you at work? _____

OCCUPATION _____ How did you hear about Full Circle/CANDII _____

D.O.B. _____ EDUCATION: High School _____ College _____ Graduate _____

REFERENCES:

1. NAME _____ RELATIONSHIP _____ PHONE _____
2. NAME _____ RELATIONSHIP _____ PHONE _____
3. NAME _____ RELATIONSHIP _____ PHONE _____

Emergency Contact:

4. NAME _____ RELATIONSHIP _____ PHONE _____

Have you ever been arrested or convicted of any violation or crime other than minor traffic? YES _____ NO _____
If yes, please explain;

WOULD YOU BE AVAILABLE ON WEEKENDS OR EVENINGS TO ASSIST WITH SPECIAL EVENTS OR CHILDREN'S PROGRAMS?

Yes _____ No _____ Depends on the date _____

Do you have a valid driver's license?
YES ___ No ___

Do you have your own transportation?
YES ___ NO ___

AVAILABILITY

DAYS _____ EVENINGS _____ WEEKENDS _____

TIMES _____

PRIOR VOLUNTEER EXPERIENCE

SKILLS/INTEREST _____

Volunteer Signature _____