



HER PLACE VOLUNTEER APPLICATION

THANK YOU FOR YOUR INTEREST IN VOLUNTEERING AT HER PLACE. PLEASE COMPLETE ALL SECTIONS OF THIS APPLICATION AND MAIL IT TO: HER PLACE, P O BOX 11405, ROCK HILL, 29731. OR EMAIL IT TO VOLUNTEER@HERPLACESC.ORG

YOU CAN ALSO COMPLETE IT ONLINE ON HERPLACESC.ORG

PERSONAL INFORMATION

Full Name				Preferred Name			
Address				City		State	Zip
Home Phone		Cell Phone		Email			
Birthdate		Languages Spoken					
EMERGENCY CONTACTS							
1. Name		Relationship		Phone			
2. Name		Relationship		Phone			
3. Name		Relationship		Phone			
Health Problems/Concerns							

If you, the volunteer, has an emergency, and the emergency contacts cannot be reached, HER PLACE reserves the right to seek medical assistance at the nearest medical facility and will be held harmless in all legal issues that may arise from this decision.

Do you give Her Place permission to share contact information with volunteer committees, Her Place staff, and volunteers, in affiliation with your volunteer services or for recruitment purposes? YES NO

VOLUNTEER AVAILABILITY

Please check off times and days that you are interested and available to volunteer.

	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
MORNING							
AFTERNOON							
EVENING							
OVERNIGHT							

How often would you like to volunteer at HER PLACE?

Weekly Bi-weekly Monthly Special Events

Please list your skills or talents that you would like to share at Her Place

Help needed but not limited to are in the following:

- Office administration Art Craft Exercise Transportation Food preparation
 Training or instruction (budgeting, parenting skills, gardening, culinary, nutrition, communication, etc.)
 Fundraising Marketing Information Technology.

Additional Comments if any:

CURRENT EMPLOYMENT & PAST VOLUNTEER INFORMATION

Please list current or most recent:

Employer: _____ Position: _____ Since: _____

Retired: YES NO

Current places you are volunteering:

Other Places you have Volunteered:

List three references and their contact information:

Reference #1

Name: _____ Relationship: _____

Phone: _____ Email: _____

Reference #2

Name: _____ Relationship: _____

Phone: _____ Email: _____

Reference #3

Name: _____ Relationship: _____

Phone: _____ Email: _____

SIGNATURES, CONFIDENTIALLY AND CRIMINAL INFORMATION

I authorize Her Place to make inquiry into my **references** and relevant information in the volunteer consideration process. I understand that completion of this application does not indicate whether there are any positions currently open and that it does not obligate Her Place to extend association on a volunteer basis. I understand that my volunteer file will remain confidential. My signature constitutes that my responses are true and complete and that I have read and understood the information in this paragraph.

I grant Her Place permission to initiate a background check as necessary for volunteer placement or responsibilities within the Her Place.

I, _____ confirm by signing this statement that I have not been convicted of a misdemeanor or felony crime or any other related conviction other than a traffic violation that may exclude me from volunteering at Her Place. Furthermore, I grant Her Place permission to acquire criminal records that I may have incurred as necessary for volunteer placement or responsibilities within the Her Place.

It is Her Place’s policy to retain, promote, terminate, and otherwise treat any and all volunteers and applicants on the basis of merit, qualification and competence. This policy shall be applied without regard to any individual’s sex, race, religion, natural origin, pregnancy, age, marital status, handicap, or sexual orientation.

Print Name: _____

Signature: _____ Date: _____

<p>For office use only:</p> <p><input type="checkbox"/> Attended Orientation <input type="checkbox"/> All lists updated <input type="checkbox"/> Review/Sign Handbook</p>	<p><input type="checkbox"/> Welcome letter sent <input type="checkbox"/> Application in database <input type="checkbox"/> Review/Sign Waiver of Liability</p> <p><input type="checkbox"/> Review/Sign Vol. Agreement <input type="checkbox"/> Background Check</p>
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