



VOLUNTEER APPLICATION

Name: First: _____ Middle: _____ Last Name: _____

Home Address: _____

Phone: _____ S.S.#: _____ Birth Month _____ Day _____

Mailing Address (If different): _____

Past Addresses (Last 7 years) 1 _____

2 _____

3 _____

Transportation? Yes No Driver's License # _____ State _____

Emergency contact: _____ Phone # _____

Languages spoken other than English _____

Interests and hobbies _____

Best time to call with an assignment _____

When available to do volunteer work (time of day/days of the week) _____

Allergies: (Including cigarette smoke, animals, etc.) _____

When are you unavailable? _____

I am willing to work in the following geographical areas:

Truckee

Homewood

Graeagle

Kings Beach

Tahoe City

Sierraville

Incline Village

Portola

Loyalton

I am interested in participating in the following areas:

Patient / Family Support (visiting)

Fundraising

Bereavement Support

Administrative/Office Support

Children's Bereavement

Thrift Stores

Have you ever been arrested or convicted of a crime? Yes No (Do not include any marijuana possession misdemeanor convictions more than two years old. Note: Convictions are not an automatic bar to volunteerism).

If "Yes," please explain: _____

Please list the names of people to contact who can provide us with a personal or professional reference:

Name _____ Phone _____

Name _____ Phone _____

Applicant Signature _____ Date _____

Thank you for your interest in Volunteering

Please return your completed application to Val Sutter, Volunteer Coordinator

P.O. Box 759, Truckee, CA 96160

If you have any questions, call 530-582-3534

(fax) 530-582-6278