



VOLUNTEER APPLICATION

Contact Information

Name: _____ Phone: _____

Address: _____ City, State, ZIP: _____

Email: _____

Volunteer Position Information

Which volunteer position are you applying for: _____

Describe your qualifications and/or skills which would benefit this position: _____

Describe your involvement in the Baker County Community: _____

How many hours per month are you willing to commit as a volunteer? This may include evening hours.

Personal Experience

Current Occupation: _____

Current or Previous volunteer experiences: _____

Do you have any special needs that we should know about? If yes, please explain: _____

Please list two (2) personal references: _____

Name

Phone

Email

Name

Phone

Email

Emergency Contact: _____

Name

Phone