



# Volunteer Application

First and Last Name			
Employer/ Affiliation			
Address			
Phone Number		Birthday (mm/dd)	
E-Mail Address			
Emergency Contact		Phone Number	

- Are you 18 years or older?  Yes  No
- How did you hear about the WCA? \_\_\_\_\_
- Mark an X next to the areas you are interested in volunteering with. Please know there are unique training requirements for each area.

	Areas to Volunteer	Times Available
<input type="checkbox"/>	Administrative Support	Daytime & Evenings Mon-Fri
<input type="checkbox"/>	WCA Boutique	Daytime Mon-Fri & Evenings Mon-Thurs
<input type="checkbox"/>	Community Events	Afternoon/ Evenings

- I would like to volunteer approximately \_\_\_\_ hours per week or \_\_\_\_ hours per month.
- Please list any special skills or qualifications you have acquired from employment, previous volunteer work, or through other activities.
- Please list any foreign languages you know and indicate your proficiency (intermediate, fluent, etc.):
- Have you ever been convicted of a crime?  Yes  No  
If yes, please provide details on separate sheet.

\*Please note: we cannot accept applicants who have received services from the WCA within the past 2 years.

8. I wish to be considered as a volunteer within the WCA programs. I understand and authorize the WCA to conduct a background check in connection with this application. Data obtained will be kept confidential.

I will make every effort to attend required training classes and meetings and hereby acknowledge and understand the expectations. If circumstances beyond my control prevent me from attending, I will contact the appropriate volunteer coordinator to make alternate arrangements for my absence.

Signature \_\_\_\_\_

Date \_\_\_\_\_