

## ABDC'S VOLUNTEER TAX & LOAN PROGRAM VOLUNTEER APPLICATION



## **Personal Contact Information**

Please clearly print your Full Name as it appe	ears on your State I.D. (required fo	r booking airline tickets for travel)	
First	Middle	Last	
Mailing Address			
City, State Zip			
Phone #1: Home Work Cell (circle one)	Phone #2: Home Work Cell (	(circle one) Phone #3: Home Work C	ell (circle one)
E-Mail Address #1: Work Personal (circ	le one)		
E-Mail Address #2: Work Personal (circ	le one)		
Employer or University		Unisex T-Shirt Size	
Date of Birth* (MM/DD/YYYY)	Height $(F'I'')$	Weight* (lbs.)	
* Required for purchasing airline tickets	•	•	
<b>Emergency Contact Informat</b>	ion		
First	Last		
Relationship to You	<u>.</u>		
Mailing Address			
City, State Zip			
**			
Phone #1: Home Work Cell (circle one)	Phone #2: Home Work Cell (	(circle one) Phone #3: Home Work C	cell (circle one)
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	•	<del>-</del>	
Program Questions			
Have you ever been convicted or plead guilty t	o a crime other than minor traffic v	iolations? Yes No (circle one)	
If <b>Yes</b> , please explain.			
11 1es, picase explain.			
We get this question is an effect to accommo	an a afoto and the a afoto of the ac-		ingualify
We ask this question in an effort to assure you	r sujety ana tne sajety oj tnose we s	serve, your answer will not necessarily at	<i>squaнуу уои</i>
from participating in the program.	II Dal ( : 1		
Are you willing to travel on: Weekends W	eekiongs Both (circle one)		

How many trips would you be willing to travel on? 1 2 3 More (circle one)

Are you comfortable being subjected to the extreme temperatures and weather conditions in rural Alaska? Yes No (circle one)

Are you comfortable with travelling in small airplanes, ATVs, or snow machines? Yes No (circle one)

Are you comfortable sharing a workspace/sleeping area with members of the opposite sex? Yes No (circle one)

Please indicate that you understand the following: upon acceptance into the Volunteer Tax and Loan Program you will be required to submit a refundable \$200 deposit to ABDC. Yes No (circle one)

Please explain why y	ou are inte	rested in vol	lunteering for this progra	m <u>.</u>					
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Personality Q	uestion	ıs							
			mmunicate well with othe	ers, outgoi	ng, problen	n solver, etc.) and abili	ities ( <i>tax pre</i>	p experience/	
knowledge, customer program.	service, m	nanagement/	supervising experience,	work well	with other	cultures, etc. ) that you	feel will ber	nefit the	
Please list any progra	ıms that yo	u have volu	nteered with in the past (	vou may ii	nclude ABD	OC)			
be required to lift and you from participating	d carry hed	avy objects i ogram).	se circle any that apply (to include 50 lbs. in additional control of the control	tion to you	ır personal	gear; your answers wi	ll not necess	arily disqualify	
Allergies Back Problems	Yes Yes	No No	Lifting Restrictions Motion Sickness	Yes Yes	No No	Sea Sickness Fear of Flying	Yes Yes	No No	
Any Other:	1 68	NO	Motion Sickness	168	INO	real of Flying	1 68	NO	
<u></u>	lditional in	formation o	r special needs you have	that you fo	eel should b	e brought to ABDC's a	attention.		
			-P	5					
Authorization	1								
By signing below, yo	u agree to	abide by the	policies and procedures	set forth b	y the Alask	a Business Developme	ent Center, In	ic., you	
understand that you v	vill be volu	inteering at	your own risk and that th	e organiza	ation, its em	ployees and affiliates,	cannot assun	ne any	
responsibility or liabi	ility for any	y accident, i	njury or health problem v	vhich may	arise from	any volunteer work yo	u preform, ai	nd you agree	
that all information y	ou have pr	ovided in th	is application is true and	complete	to the best of	of your knowledge.			
Signature						Date		1	
D 137									
Printed Name									
Submittal Inf	ormati	on							
			a, email, or in person to:						
Trease submit this sig	зиси аррис	ation by lax	x, chian, or in person to.						
Alaska Business De	velopment	t Center, In	c.	Please	submit the	following with your s	signed appli	cation:	
840 K Street, Suite 202				Current version of your resume;					
Anchorage, Alaska 9	Two references (character and/or professional); and a								
Phone: (907) 562-03	35			Letter o	f recommer	ndation (student volunt	eers only).		
Fax: (907) 562-6988									

Thank you for your interest in ABDC's Volunteer Tax & Loan Program. ABDC staff will contact you at their earliest convenience. If you are new to the program and pass the initial screening phase, ABDC staff will request an interview with you. If you have any questions whatsoever please contact ABDC as needed.

rebecka@abdc.org