



10405 – 6<sup>TH</sup> AVENUE NORTH, SUITE 250  
PLYMOUTH, MINNESOTA 55441  
(763) 531-2424

## An Equal Opportunity Employer Volunteer Application

Applicants will receive consideration for volunteer positions without regard to race, color, national origin, creed or religion, sex, marital status, age, physical or mental disability or any other personal characteristic protected by federal, state or local law.

**PLEASE PRINT IN INK**

NAME \_\_\_\_\_ DATE \_\_\_\_\_  
*Last First Middle*

ADDRESS \_\_\_\_\_  
*Street City State Zip*

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Email \_\_\_\_\_

### AREAS OF INTEREST

TYPE OF VOLUNTEER POSITION DESIRED: \_\_\_\_\_ DATE AVAILABLE: \_\_\_\_\_

- ☐ Patient/Family Care Volunteer ☐ Administrative Support ☐ Other: \_\_\_\_\_  
☐ Needlework Volunteer ☐ Bereavement Volunteer ☐ Spiritual Care Volunteer

### REFERRED BY

- ☐ Church Bulletin ☐ Ad \_\_\_\_\_ ☐ Current Staff Member \_\_\_\_\_  
*Name Name of Publication Employee/Volunteer's*  
☐ None-Walk In ☐ Other \_\_\_\_\_

### Training AVAILABILITY (Please notify Volunteer Coordinator of any changes in availability.)

<b>Monday:</b>	<input type="checkbox"/> Morning	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Evening	<b>Overnight:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No <b>Other:</b> _____
<b>Tuesday:</b>	<input type="checkbox"/> Morning	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Evening	
<b>Wednesday:</b>	<input type="checkbox"/> Morning	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Evening	
<b>Thursday:</b>	<input type="checkbox"/> Morning	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Evening	
<b>Friday:</b>	<input type="checkbox"/> Morning	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Evening	
<b>Saturday:</b>	<input type="checkbox"/> Morning	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Evening	
<b>Sunday:</b>	<input type="checkbox"/> Morning	<input type="checkbox"/> Afternoon	<input type="checkbox"/> Evening	

The agency does not illegally discriminate on account of an applicant's age. If you are under 18, you may be required to prove your age for some jobs where state laws or regulations impose restrictions .

Are you 18 years of age or older? ☐ Yes ☐ No

**EDUCATION** List all education you would like considered in the evaluation of your application.

1.)  
School: \_\_\_\_\_  
Type of Degree: \_\_\_\_\_  
Relevant Courses or Experience: \_\_\_\_\_

2.)  
School: \_\_\_\_\_  
Type of Degree: \_\_\_\_\_  
Relevant Courses or Experience: \_\_\_\_\_

3.)  
Other Education (Seminars, Military Schools, etc.)

**LICENSE/CERTIFICATION** Complete this section if a license/certification is related to the duties of the position for which you are applying.

Type License/Certification	State	Number	Expiration Date

**SKILLS** List any skills you have that add to your qualification for this position.

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## PRIOR EMPLOYMENT

Have you been employed here before? If yes, please complete the following:

Dates	
From	To
Position Held	Immediate Supervisor
Reason for Leaving	

**PERSONAL REFERENCE** List any other references other than relatives or former employers that we may contact.

1.	Name	Address	Phone
2.	Name	Address	Phone
3.	Name	Address	Phone

## WORK OR VOLUNTEER EXPERIENCE

Indicate all work or volunteer experience beginning with your current or most recent position. Complete all sections. Provide dates for positions held in the last 5 years only.

Employer/Organization: \_\_\_\_\_

Address: \_\_\_\_\_

Dates Employed: From \_\_\_\_\_ To \_\_\_\_\_ Position Title: \_\_\_\_\_

Primary Job Duties: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Employer/Organization: \_\_\_\_\_

Address: \_\_\_\_\_

Dates Employed: From \_\_\_\_\_ To \_\_\_\_\_ Position Title: \_\_\_\_\_

Primary Job Duties: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Employer/Organization: \_\_\_\_\_

Address: \_\_\_\_\_

Dates Employed: From \_\_\_\_\_ To \_\_\_\_\_ Position Title: \_\_\_\_\_

Primary Job Duties: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Employer/Organization: \_\_\_\_\_

Address: \_\_\_\_\_

Dates Employed: From \_\_\_\_\_ To \_\_\_\_\_ Position Title: \_\_\_\_\_

Primary Job Duties: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## CRIMINAL RECORD

Have you been convicted of or plead guilty to a criminal offense in the last seven (7) years?

☐ yes ☐ no

If "YES", state place of and nature of conviction: \_\_\_\_\_

\_\_\_\_\_

Date of conviction: \_\_\_\_\_ Status of Probation: \_\_\_\_\_

Name of Probation Officer, if applicable: \_\_\_\_\_

Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Note: A conviction does not mean automatic rejection for volunteer position. If you are on probation, we will contact your Probation Officer for a reference.

By signing below, I am certifying that all information provided by me in this application is true and complete to the best of my knowledge.

I authorize investigation of the truth and completeness of all information provided by me in this application. In consideration of providing information to assist me in my volunteer application, I hereby release any and all sources of such information, their agents and employees from any claims I may have arising out of the disclosure of information about me.

In consideration of the Agency considering me for volunteer placement, I hereby release the Agency, its agents and employees from any and all claims I may have arising from the Agency's seeking information about me in connection with my application for volunteer placement with the Agency.

By signing below, I am agreeing that if I am accepted, unless otherwise provided in a signed written agreement, my volunteer placement may be terminated by me or by the Agency at any time for any reason with or without cause.

I agree that any offer of volunteer placement is conditioned on 1) successful completion of required volunteer training; 2) receipt of favorable references (as determined in the sole discretion of the Agency); and 3) a favorable interview. I agree that any offer of volunteer placement may also be conditioned on 1) demonstration of physical and mental ability to perform essential job functions; 2) passing a Tuberculosis test; and 3) successful completion of a criminal background investigation as required by the State of Minnesota (if applicable).

**Applicant:** \_\_\_\_\_

**Date:** \_\_\_\_\_