APPLICATION FOR VOLUNTEERING

We appreciate your interest in our program and will be happy to explore with you possible volunteer opportunities. The following information regarding the application process will assist you in presenting your qualifications.

Please give complete answers to all application questions that apply to you.

AUTHORIZATION FOR RELEASE OF INFORMATION

I herby authorize The Phoenix Residence, Inc. to verify any information contained on this application. Any offer for volunteer opportunities is dependent upon or subject to satisfactory verification of past or present experiences.

PLEASE READ CAREFULLY AND SIGN THE STATEMENT BELOW

I understand that volunteering at this company is "at will", which means that either I or the company can terminate the volunteer relationship at any time, with or without prior notice, and for any reason not prohibited. I understand that no supervisor, manager, or executive of the company, other than the president has any authority to alter the foregoing.

I understand that all offers for volunteer opportunities are on a contingency basis. If I am offered a conditional offer for volunteering, I may be asked to submit to a drug and/or alcohol testing as outlined in company policy, depending on the duties that be assigned. I understand that I may be required to voluntarily submit to urinalysis, breath, blood or saliva, drug, and alcohol testing. If the tests are positive or if I refuse to undergo testing, any conditional offer will be withdrawn, provided that, where an offer is withdrawn based on a positive alcohol or drug test, the withdrawal is related to the volunteer position and consistent with business necessity.

If I am offered a conditional offer for volunteering, I authorize The Phoenix Residence, Inc. to submit a background study relevant to the licensing requirements of the facility. I understand that if I am disqualified by the investigating agency from a position allowing direct contact with persons receiving services from The Phoenix Residence, Inc. programs, the offer may be withdrawn.

If I am accepted as a volunteer, I understand that omissions and/or false information are sufficient cause for discharge. In consideration for volunteering, I agree to conform to the rules, regulations, and policies of The Phoenix Residence, Inc. Failure to abide is sufficient cause for discharge.

By signing below, I grant The Phoenix Residence, Inc. permission to verify any information contained on this application. Any offer for volunteer opportunities is dependent upon or subject to satisfactory verification of this information.

NAME:		DATE:
	Written Signature	

PLEASE PRINT ALL INFORMATION REQUESTED

Name				
Address				
Street		City	State	Zip
Telephone Number_				
	Home	Work/Other	Cell	
Email Address:				
******	*****	*******	*****	*****
*PERSON TO NOTIFY	Y IN AN EMERGEN	CY:		
Name				
Relationship				
Telephone Number				
	Home	Work/Other	Cell	
******	******	********	******	*****
EMPLOYMENT:				
Current Employer				
Position				
Past Employer				
Position				
*******	******	********	******	******
EDUCATION: State N	Name, location, an	d level completed		
High School				
College/University				
Special Training				
Are you presently at	tending school?	YES NO		
Will you be receiving	g credit for your vo	olunteer work? YES	NO	
AVAILABILITY:				
Once/Month	Twice/Month	Once/Week	_ Twice/Wee	ek
Other (please specify	y)			

Check all day and times you are available.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Mornings							
Afternoons							
Evenings							

REFERENCES (PLEAS	E DO NOT INCLUDE RELATIVES)		
Name	Affiliation		Contact Telephone #
1			
2.			
*******	***********	*****	********
ADDITIONAL INFORI	MATION:		
What are your gener	ral areas of interest?		
Have you served as a	a volunteer before? If so, please des	scribe	
have you served as a	i volunteer before: If so, please des	scribe.	
Skills: <i>Please check a</i>	ll the skill areas you would be willin	g to share.	
nterpersonal Comm	unications	Office	Services
Enjoy meetii	ng and working with people		General clerical
One-to-one	time with residents		Writing letters
			Phone calling
Marketing/Public Re	lations/Fundraising		Answering phones
Public Speak	ing		Typing
Special Even			Data Entry/Filing
	promotional materials		777 0
	otional items	Additi	onal Skills
	writing/editing	radici	Languages (specify)
	-		Languages (specify)
Grant writin	Б		Cananitanaaftuuana
Duilding on a Carrier	1-		Computer software
Building and Ground	.5		
Yard work			Website development
Flower/Vege	etable Gardening		Website maintenance
	ntenance/repairs		Photography
Painting	, ,		Arts and Crafts
Woodworkir	าต		Music (singing,
	· 6		instruments, etc.)

,	er commitment and have answered the application y knowledge. I give The Phoenix Residence, Inc. ve listed.
Signature	Date
Applicants between the ages of 12-18 m guardian. This applicant has my permission to vol	nust have this application signed by a parent or legal unteer at The Phoenix Residence, Inc.
Parent/Guardian Signature	Date

updated 4/2024