



## Volunteer Application Form

### Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

\_\_\_\_\_ *City State ZIP Code*

Phone: \_\_\_\_\_ Email \_\_\_\_\_

Date of Birth (MM/DD/YYYY): \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Gender Identity: \_\_\_\_\_

Who to notify in case of an emergency? \_\_\_\_\_

Telephone number: \_\_\_\_\_

Occupation (Past occupation if retired): \_\_\_\_\_

Do you have a valid driver's license?      YES      NO  
        

Have you ever been convicted of a felony?      YES      NO  
        

If yes, explain:

\_\_\_\_\_

Please tell us why do you want to volunteer with Vegas Angels?

Please tell us about any educational background, work or volunteering experience that would be relevant to the position and the organization.

If you have volunteered before, please give details of where you have volunteered, for how long and describe your volunteer role.

What hobbies, skills, special interests or qualities do you have that may be relevant to the volunteer role you are applying for?

When are you available to volunteer? (Please specify days, times and the length of commitment you would like to make)

Please list all languages spoken and fluency level:

### References

*Please list three personal or professional references.*

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Full Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

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

### Disclaimer and Signature

*I hereby give my consent to contact my references and to conduct a background check.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*I certify that my answers are true and complete to the best of my knowledge.*

*If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please return completed form to: vegasangelsorg@gmail.com**



(725) 222-8565

VEGASANGELSORG@GMAIL.COM

[www.vegasangels.org](http://www.vegasangels.org)



Vegas Angels is a 501(C)3 nonprofit organization. Federal Tax I.D. number: 87-4347939.