



The RaRa Foundation Inc. Volunteer Application

Application Date: _____ Volunteer Position: _____

Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Email: _____

Driver's License Number: _____ Social Security: _____

Under 18:

Parent Name: _____ Email: _____

Home Phone: _____ Cell Phone: _____

EDUCATION:

Highest Level of Education: _____

EMPLOYMENT: *(If applicable)*

Current Employer: _____ Position/Title: _____

Address: _____ City: _____ State: _____ Zip: _____

Contact Name: _____ Phone Number: _____

Contact Email: _____

Would you like us to keep your employer abreast of your volunteer service and achievement?

Yes No

SKILLS & EXPERIENCE

Please describe any Special Training, Skills, or Hobbies you would be willing to discuss or teach:

Please list any Groups, Clubs, or Organizational Memberships you are affiliated with:

Please describe any Prior Volunteer Experience (Including Organization Names/Dates of Service):

What Personal Experiences have you had that may prepare you to work as a volunteer with the RaRa Foundation Inc.?

Why do you want to volunteer? What do you want to gain from this volunteer experience?

Have you ever been convicted of a crime? If yes, please explain the nature of the crime and the date of the conviction and disposition. (Conviction of a crime is not an automatic disqualification for volunteer work.)

REFERENCES

Please list three people who know you well and can attest to your character, skills, and dependability. Include your current or last employer.

Name/Organization	Relationship	Length of Relationship	Phone Number And Email

Please read the following carefully before printing and signing this application:

I understand that this is an application for and not a commitment or promise of volunteer opportunity. I certify that I have and will provide information throughout the selection process, including on this application for a volunteer position, and in interviews with RaRa Foundation that is true, correct, and complete to the best of my knowledge. I certify that I have and will answer all questions to the best of my ability, and that I have not and will not withhold any information that would unfavorably affect my application for a volunteer position. I understand that information contained on my application will be verified by RaRa Foundation Inc. I understand that misrepresentations or omissions may be cause for my immediate rejection as an applicant for a volunteer position with RaRa or my termination as a volunteer. I also agree to a background check.

I am aware that if I am under 18 years of age that I must also have the signature of my parent or guardian stating that they are aware that I am volunteering for RaRa Foundation and that they are giving me permission to volunteer for the organization.

Signature _____ **Date** _____

Signature of Parent/Guardian for volunteers under the age of 18.

I am giving permission for my son/daughter to work as a volunteer for RaRa Foundation Inc.

Signature _____ **Date** _____

Please Save Your Completed Form and Submit it on Our Website!