Applications can be submitted in two ways:

Print, fill out, and mail to: Changin' Hearts Foundation, Inc.
P. O. Box 841

Palmetto, Georgia 30268-0841

Fill out the application and email it to admin@changinhearts.org



CHANGIN' HEARTS FOUNDATION, INC. VOLUNTEER APPLICATION

*** PLEASE WRITE LEGIBLY ***

Contact Information						
Last Name:		First Name:				
Age:	Date of Birth (mm/dd/yyyy):					
Street Address:						
City:	State:		ZIP Code:			
Currently Employed? YES or NO	If yes, occupation:					
Cell Phone:	Home Phone:			Work Phone:		
E-Mail:						
Availability						
Weekday: Mornings / Afternoons / Evenings		Weekend: Mornings / Afternoons / Evenings				
Person to Notify in Case of Emergency Information						
First Name:		Last Name:				
Street Address:						
City:	State:		ZIP Code:			
Cell Phone:	Home Phone:		Work Phone:			
Relation to you:						
Previous Volunteer Experience						
Summarize your previous volunteer experiences. Who did you volunteer for and what did you do?						
Describe your <u>favorite</u> volunteer experience:						
Special Skills / Qualifications						
What special skills and qualifications have you acquired from employment, previous volunteer work, or through						
other activities, including hobbies and sports?						

Languages Fluently Spoken:	
What are your interests?	
Background Information	
Have you ever been convicted of a crime? (This does not include minor traffic offens sealed, expunged, or statutorily eradicated.) YES or NO	ses and/or convictions which have been
If yes, please explain in detail:	
Other Questions	
How did you hear about Changin' Hearts Foundation, Inc.?	
Why are you interested in volunteering with us?	
How do you hope to benefit from this experience?	
Certification of Application Completion	
"I certify that all information submitted by me on this application is t if any false information, omissions, or misrepresentations are discov and active volunteer status may be termi	ered my application may be rejected
Signature of Applicant:	Date: