



Volunteer Application

		Applicant Information	on	
Full Name:	Last	First	Da <i>M.I.</i>	ite:_
Address:	Street Address			Apartment/Unit #
	City		State	ZIP Code
Phone:		Email		
Referred by				
		Education/ Work Exper	rience	
Highest Grade Level Completed:				
Work Exper	ence:			
		References		
Please list i	hree references			
Full Name:			Relationship:	
Company:			Phone:	
Email Addre	SS:			
Full Name:			Relationship:	
Company:			Phone	
Email Addre	SS:			
Full Name:			Relationship:	
Company:			Phone:	
Email Addre	ess:			





Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge. If this application leads to an internship or volunteer offer, I understand that false or misleading information in my application or interview may result in my release. With my signature, I acknowledge that I waive any and all claims that the Human Development Commission arising out of the performance of my duties, whether for an on-site work-related injury, personal injury, or otherwise. I assume all liability in the event that I am injured while engaged in related work at HDC.

Signature: _____ Date: _____

With my signature, I assure the Human development commission that I have not been convicted of any criminal or state law violations; particularly but not limited to crimes committed upon minors.

Signature: _____ Date: _____





Next Steps

Thank you for applying to be a volunteer with the Thumb Area Assault Crisis Center, a program within the Human Development Commission. We ask that you complete the next steps to fully complete your declaration of interest. Please email Kristen M. the following items:

- Resume
- Completed Application

Please feel free to reach out with any questions or to discuss this opportunity with us. Kristen M. can be reached at 989-672-1727 or at her email KristenM@hdc-caro.org.