

Mary Joe's Project

Volunteer Application

	Applican	t Information	
Full Name:		Date:	
Last	First	M.I.	
Address:			
Phone:		Email	
Date of Birth:	Social Security No.:_	DL No/State:	
Are you a citizen of the United State	YES NO	YES NO If no, are you authorized to work in the U.S.? ☐ ☐	
Have you ever been convicted of a or misdemeanor?	felony YES NO		
If yes, explain:			
Do you have a physical condition or disability that may limit your ability to perform any voluntary duties? If yes, explain:_			
Education			
High School:	Addres	es:	
From: To:		YES NO e?	
Counselor Name:			
College:	Addres	SS:	
From: To:		YES NO e?	
Counselor Name:			
	Dof		
References Please provide a personal and professional reference.			
Full Name:		Relationship:	
Address:		Phone:	
Full Name:		Relationship:	
Address:		Phone:	

Previous Employment or Volunteer Experience				
Company:	Phone:			
Address:	•			
Job Title/Duties:				
From: To:	Reason for Leaving:			
May we contact your previous supervisor for a reference?	YES NO			
Company:	Phone:			
Address:	Cum am da am			
Job Title/Duties:				
From: To:	Reason for Leaving:			
May we contact your previous supervisor for a reference?	YES NO			
Disclaimer and Signature				
Do you authorize Mary Joe's Project to run a background	d check: (Please initial) Yes No			
I certify that my answers are true and complete to the bes	est of my knowledge.			
If this application leads to employment, I understand that interview may result in my release.	t false or misleading information in my application or			
Signature:	Date:			