



Phone: 419.244.4824  
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www.naomith.org

## Volunteer Application / Not a Paid Position

**Please print**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Telephone \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Social Security # \_\_\_\_\_

DOB: \_\_\_\_\_ SS #: \_\_\_\_\_

Driver's License No \_\_\_\_\_ Proof of Insurance \_\_\_Y\_\_\_N Company \_\_\_\_\_

**(Copy of D.L. and Insurance Card)**

Date of Birth \_\_\_\_\_

Personal Information (please circle correct response):

Gender:        Male            Female

Education (highest level completed)

Grades 1-5    6-9    11-12    College    Business    Graduate School    Technical/ Vocational

Other \_\_\_\_\_

When would you be able to start? \_\_\_\_\_

List previous volunteer experience \_\_\_\_\_

Please list the area you wish to volunteer in \_\_\_\_\_

Please tell us why you want to volunteer with our agency. \_\_\_\_\_

Please tell us what you hope to gain from your experience with us. \_\_\_\_\_

Volunteer availability: (Circle all applicable)

Number of Days per week: 1 2 3 4 5    Number of hours per week: \_\_\_\_\_

Monday    Tuesday    Wednesday    Thursday    Friday    Saturday    Sunday

**In an emergency, notify:**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_ Telephone No. \_\_\_\_\_

\_\_\_\_\_  
Volunteer Signature        Date

\_\_\_\_\_  
Staff Signature                Date