

Friends of Yates, Inc.
VOLUNTEER APPLICATION FORM

Name

Phone Number

Date of Birth

Home Address

City, State

Zip

Employed By (If Employed)

Phone Number

Address

Email

How do you prefer to be contacted? By Phone By Mail By Email

May you be called at work? Yes No

Brief description of work: _____

Formal Education (highest year of school completed): _____

Do you speak a foreign language? Yes No If yes, which language _____

Do you drive? Yes No Do you have regular access to a car? Yes No

Current community activities: _____

List current and previous volunteer work (list all previous volunteer work including brief description of duties and activities, dates of service.):

What are your reasons for wanting to participate as a Friends of Yates, Inc. volunteer?

Friends of Yates, Inc.

Have you had any personal experience(s) involving?

- Advocacy
- Child Care
- Court System
- Other agencies offering services to women/children

If so, please explain: _____

How did you learn of our program: _____

Have you ever been convicted of a crime other than a traffic violation? Yes No

If yes, what charge? _____ Date convicted: _____ Where _____

Do you consent to a routine check of your criminal records? Yes No

Please list three references of people who know you well, other than relatives, preferably for whom you have worked in either a paid or volunteer capacity. If you are currently working, either paid or as a volunteer, please include the name of your supervisor.

Name	Address	Zip Code	Phone	Relationship
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____

How long have you lived in the area? _____

Friends of Yates, Inc., Inc. reserves the right to make any checks deemed appropriate as to the suitability of anyone responsible for this confidential work. All information obtained will be held in the strictest confidence.

Applicant Signature

Date

Friends of Yates, Inc.
PART TWO

Please answer the following questions in **paragraph form** on a separate piece of paper.

1. Write a short summary about your interest in volunteering and how you hope to benefit from the volunteer experience.
2. Briefly explain your knowledge about victims of domestic violence.

PLEASE RETURN YOUR COMPLETED APPLICATION:

MAIL TO: Sara Dolton
Friends of Yates, Inc. Fax: Sara Dolton (913) 321-1569
1418 Garfield Ave. Email to: sdolton@friendsofyates.org
Kansas City, KS 66104