

Emergency Contact: _____
(Name) (Relationship)

Phone Number(s): Home: _____ Work: _____
Cell: _____

References (Adult Volunteers Only):

Please provide the names of three persons, not related to you, whom you have known for more than one year for reference purposes:

	Name	Telephone #	Organization
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____

All information contained on this application is, to the best of my knowledge true.

Volunteer Signature: _____ Date: _____

Office Use Only:

Interview Date: _____

Interviewed By: _____

	Please indicate when completed:	Date	Staff Initials
1.	Statement of Confidentiality	_____	_____
2.	Police Check (Adults Only)	_____	_____
3.	Reference Check (Adults Only)	_____	_____