

# Volunteer Application

Date:

Name:

Address:

State:  Zip Code:

Date of Birth:  \*\*\*\*Minimum Age 18

Home Phone:  Cell Phone:

Email:

Emergency Contact Name:  Emergency Contact Phone:

Are You A Student?  Yes  No Area Of Study:

Do you have any limitations that will restrict your volunteering?  Yes  No

Sixteenth Street Community Health Centers  
1337 S Cesar E. Chavez Drive  
Milwaukee, WI 53204  
Attention: Kate Jaeger, Volunteer Program  
Email: kate.Jaeger@sschc.org  
Phone: 414-385-3735  
Fax: 414-643-1066  
www.sschc.org

If Yes, Please explain:

Have you ever been convicted of a crime?  Yes  No

If Yes, Please explain:

How were you referred to us?

Why do you want to volunteer here?

What skills or talents would you like to use?

What would you like to gain from the volunteer experience?

## Current Employment

Name of Employer:  Length of Employment:

Complete Address:

Phone:  Job title:

## Current or Past Volunteer Experiences

Name of Agency:  Length of time Volunteering:

Complete Address:

Phone:  Job title:

Name of Agency:  Length of time Volunteering:

Complete Address:

Phone:  Job title:

## References: (Other than friends and relatives)

Name:		Relationship:	
Organization:		Phone:	
Email:			
Name:		Relationship:	
Organization:		Phone:	
Email:			

The above information is correct and complete to the best of my knowledge, without consequential omissions of any kind. I authorize the organizations and persons named to release any information requested regarding my service, character and qualifications. I understand that the agency may do a background check. I acknowledge that by completing this application the agency is not obligated to offer me a volunteer position.

Signature Field  Date:

For Office Use:

Date Started:  Position:

Schedule:

Monday	
Tuesday	
Wednesday	
Thursday	
Friday	
Saturday	
Sunday	

Application Processing:

- |   |   |
|---|---|
| <input type="checkbox"/> Interview                  | <input type="checkbox"/> Orientation      |
| <input type="checkbox"/> Reference Check            | <input type="checkbox"/> Background Check |
| <input type="checkbox"/> Volunteer/Agency Agreement | <input type="checkbox"/> Job Description  |

# Thank you for your interest in volunteering!