



VOLUNTEER APPLICATION

Name: _____

Date: _____

Home Phone: _____

Work Phone: _____

Home address: _____

City/State/Zip: _____

E-mail: _____

VOLUNTEER OPPORTUNITIES (check all your interests)

- | | |
|---|--|
| <input type="checkbox"/> Front desk/greeter | <input type="checkbox"/> Graphic design/publication layout |
| <input type="checkbox"/> Mentoring | <input type="checkbox"/> Photographer |
| <input type="checkbox"/> Newsletter writer/editor | <input type="checkbox"/> Maintenance/repair (light duty) |
| <input type="checkbox"/> Computer set-up/repair | <input type="checkbox"/> Childcare |
| <input type="checkbox"/> Children's event chaperone | <input type="checkbox"/> Event planning |
| <input type="checkbox"/> Photo album assembler | <input type="checkbox"/> Public relations |
| <input type="checkbox"/> Housing inspector | <input type="checkbox"/> Fundraising |
| <input type="checkbox"/> General administrative | |
| <input type="checkbox"/> Typing/filing | |
| <input type="checkbox"/> Data Entry | |
| <input type="checkbox"/> Copying | |
| <input type="checkbox"/> Major mailings | |

AVAILABILITY (check preferences)

Check available days:

Mon Tues Wed Thurs Fri Sat/Sun

Check available times:

Morning Afternoon Evening

I would prefer:

Regular schedule Flexible schedule On call/as needed

How did you hear about Good Shepherd Housing? _____

What do you hope to accomplish as a volunteer? _____

Have you ever been convicted of any crimes? no yes (If yes, please explain) _____

(please turn page over to continue)

May we use your image or name in promotional or educational materials demonstrating your work to help our clients? (newsletters, display boards, etc.) yes no

EMERGENCY CONTACT

Name: _____

Telephone: _____

Do you have any special requirements of which you want us to be aware? _____

STATEMENT OF CONFIDENTIALITY AND CONFLICT OF INTEREST

(initial) I hereby certify that neither I, nor any member of my immediate family, will profit by or have a personal financial interest in the activities with which I am involved.

I also understand that any information obtained through my volunteer work, about any person or agency, is strictly confidential. I will not repeat any such information to anyone outside the agency or in any way indicate my knowledge of current or past clients of Good Shepherd Housing and Family Services.

STATEMENT OF INFORMED CONSENT

(initial) I understand that I may choose to participate or not participate in a volunteer activity presented to me. I wish to volunteer and hereby assume the risk, with respect to any liability of Good Shepherd Housing and Family Services for such risks, of any accident or injury to person or property that I may sustain in connection with my participation as a volunteer. I hereby release and discharge Good Shepherd Housing and Family Services from any and all liability or responsibility for any such accident or injury.

I certify that I will provide complete and accurate information throughout the application process. I understand that the volunteer position I apply for may require additional personal information or background checks and that Good Shepherd Housing will verify information contained on my application. Misrepresentations or omissions may be cause for my immediate rejection as a volunteer applicant, or termination from a position if I am selected.

Signature: _____

Date: _____

Return completed application to: Good Shepherd Housing
8305 Richmond Highway #17B
Alexandria, VA 22306
703-768-9404 (voice) 703-768-9419 (fax)
steene@goodhousing.org