

Volunteer Application

Make a difference in the life of a child



1. Name _____
 First **Middle or maiden** **Last**

2. Address _____
 Street **City/State** **Zip**

3. Date of Birth _____ AGE _____ Place of birth _____

4. Home phone _____ Cell phone _____

E-mail Address _____

5. How long have you lived at this address? _____ Please list addresses you have lived at in the last 5 years other than your present address: (use additional sheet if necessary)

Street **City/State** **Zip**

Street **City/State** **Zip**

6. FAMILY STATUS: (please circle appropriate response)

Single Married Divorced Separated Cohabiting

Spouse's or Significant Other's name _____

Number of years married _____ Number of children _____

Please list name, age, and gender of each child: _____

How many of these children are currently living with you in your home? _____

7. EMPLOYMENT:

Current employer _____

Address _____

Your position _____ Work phone _____

Can you be called at work? _____ Best time _____

Length of time at this job _____

Last employer _____

Address _____

Reason for leaving _____

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Length of time at that job _____

8. VOLUNTEER RECORD:

List service clubs, fraternal organizations, and volunteer boards to which you belong.

Are you affiliated with a church? _____

If yes, name of church _____

List your past experience with children or youth

Do you have any health concerns that would affect your abilities as a mentor?

Do you have a valid driver's license? _____ State _____ # _____

Do you have your own car? _____ If no, do you have regular access to use of a car? _____ Car belongs to: _____

Make _____ Model _____ Year _____ Color _____

License plate # _____

Do you have current vehicle insurance as required by State law? _____

Name of Insurance Company _____

Policy # _____

Has your car insurance ever been cancelled? _____

Reason? _____

Have you had any moving violations or accidents in the last 5 years? _____

Please describe

9. PERSONAL DATA:

Please list your interests, hobbies, and activities

Do you anticipate any major life changes within the next year? (Personal, vocational, or residential)

Have you ever been arrested? _____ if yes, please explain

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10. REFERENCES:

Please give names, complete mailing addresses, and phone numbers of at LEAST three references:

Family member or relative (outside your home)

Name _____ Phone _____
Address _____

Employer or Co-worker

Name _____ Phone _____
Address _____

Friend or Neighbor

Name _____ Phone _____
Address _____

15. PLEASE INDICATE AREA(S) OF INTEREST WITH KINSHIP:

Mentoring as a: Individual _____ Couple _____ Family _____
Helping with: Activities _____ Office Work _____ Fundraising _____

Please expand on why you have interest in mentoring/volunteering with Kinship:

I understand that Kinship reserves the right to use the information provided by myself, references, and public records to determine my involvement in the Kinship program. This information is confidential to the Kinship staff and screening committee. I understand that misrepresentation of personal information or history could result in termination or non-acceptance in the Kinship program.

Signature: _____ Date: _____