



**COMMUNITY ACTION
OF SOUTHERN KENTUCKY**

VOLUNTEER APPLICATION

Program preference:

Name:

Address:

Street

City

State

Zip

Telephone Number:

Adult

Under 18

Female

Male

Tell why you wish to be a volunteer

Have you ever worked with children?

If yes, where

Have you ever worked with senior adults?

If yes, where

List any hobbies or special skills

Most recent occupation/job

How much time are you wanting to volunteer?

Available:

mornings

afternoons

evenings

Have you ever been convicted of a crime in any state (including felonies, misdemeanors, child or sexual abuse, guilty pleas of nolo contendere) other than minor traffic offenses? Yes No

If yes, explain fully, including type of offense, date and location

(NOTE: A conviction does not automatically mean you cannot serve as a volunteer. What you were convicted of, and how long ago, are important. Give all of the facts so that a decision can be made.)

List 3 work-related or professional references (not relatives)

1. Name Telephone No.
Address

2. Name Telephone No.
Address

3. Name Telephone No.
Address

The above information is true and complete to the best of my knowledge. I understand that if false statements are uncovered, then it will be sufficient cause for my dismissal from volunteering for our agency. You are authorized to make any investigation on the above information.

Signature

Date