

Volunteer Application

Contact Information	on		
N.I.			
Name Character Address of			
Street Address			
City, State Zip Code			
Home Phone			
Cell Phone E-Mail Address			
E-IVIAII AUGI ess			
Person to Notify in C	ase of Emergency		
Name			
Street Address			
City ST ZIP Code			
Home Phone			
Work Phone			
E-Mail Address			
Relationship			
Interest How did you hear about ou	ur Volunteer Program? _		
Employment/Educat	tion		
PLEASE ATTACH MOST	RECENT RESUME		
f currently employed, nam	e of employer		
Work Address:			
City:	State:	Zip Code:	
Position/Title:			
Work Schedule: (Please lis	st days and hours worke	d)	
If unemployed for how lo	ng?		

Education (Please Check One	Box)				
ess than high school High School		GED/Equivalency		Some College	
Associate Degree	ociate Degree Bachelor's Degree Mast		Degree	Professional Degree (PhD; MD; Law)	
Are you currently enrolled in school?		Yes	No	(FIID, IVID, Law)	
If YES, name of institution:					
Major:	Anticipate	d date of grad	duation:		
Is English your primary language	Yes	No			
If NO, what is your primary lang	guage?				
Are you fluent in any other lang	Yes	No			
If YES, please specify:					
Basic Information					
Briefly explain, why do you war	nt to become a voluntee	r?			
What motivates you to take an interest in working with people with disabilities?					
For legal purposes, Services	for the UnderServed	must have th	ne following	information on file:	
Have you ever been convicted pending anywhere (other than a	` ,			e any charges currently	
If YES, please explain:		Yes	No		
Have you ever been criminally of children?	charged with any crime	related to m	iistreatment, No	abuse or molestation of	
If YES, please explain:					

Interests	
Tell us in which areas you are intere	sted in volunteering:
Special Skills or Qualification	ns
	cations you have acquired from employment, previous gh other activities, including hobbies or sports.
Previous Volunteer Experien	
Summarize your previous volunteer	experience.
Avoilability	
Availability During which hours are you availab	le for volunteering?
burning without hours are you available	ic for volunteering:
Weekday mornings	Weekend mornings
Weekday afternoons Weekday evenings	Weekend afternoons Weekend evenings
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Please list three (3) references who can serve as a character reference. YOU MUST INCLUDE YOUR JOB SUPERVISOR OR ACADEMIC ADVISOR. YOU MAY NOT USE RELATIVES OR SIGNIFICANT OTHERS.

Name	
Relationship to you	
Address	
Phone	
E-Mail Address	
Name	
Relationship to you	
Address	
Phone	
E-Mail Address	
Name	
Relationship to you	
Address	
Phone	
E-Mail Address	

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal. By submitting this application, I understand and agree that this application does not obligate me to become a volunteer. This application does not obligate the agency to interview, assign or actively seek to a volunteer position for me. As a part of the agency's application process, professional agency personnel will obtain additional personal information from me. It is my responsibility to ensure that the agency receives all pertinent information. Noncompliance will result in withdrawal of consideration from the program. As part of the agency's application and interview process, I am aware that Services for the UnderServed staff are by law MANDATED REPORTERS and are required to report any "suspicion" of abuse or negligence to the proper authorities.

Name (printed)	
Signature	
Date	

Contact Information

Minjung Park

Services for the UnderServed (SUS) 305 Seventh Avenue, 10th Floor

Please send completed application to:

New York, NY 10001

Phone: 917-408-1622 Email: mpark@sus.org