The Morrison
Volunteer Application

Applicant's Name: _____
Address: _____
City: _____ State: _____ Zip: _____ Phone: _____

Notify in Case of Emergency

Name: _____
Address: _____
City: _____ State: _____ Zip: _____ Phone: _____

Employment/Volunteer Experience

Employer: _____
Position: _____
Dates: From: _____ To: _____
Employer: _____
Position: _____
Dates: From: _____ To: _____
Employer: _____
Position: _____
Dates: From: _____ To: _____

Hobbies, Skills, Talents, Special Interests, Special Training (check all that apply)

Volunteer for : ☐ Outings ☐ Special Events ☐ Mail Distribution ☐ Letter Writing
☐ Calendar Activities ☐ Special Friend ☐ Activities of Daily Living Distribution ☐ 1:1

Have you ever been arrested? ☐ Yes ☐ No

If yes, explain _____
_____

Schedule Preferred

☐ Sunday ☐ Monday ☐ Tuesday ☐ Wednesday ☐ Thursday ☐ Friday ☐ Saturday

If you are 17 years old or younger, please bring a permission letter from a parent or guardian.

_____ _____
Signature of Applicant Date

_____ _____
Activity Director Date

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