



| |
|---|
| <u>Office Use Only</u> |
| Received _____ |
| Entered into Database _____ |
| Background Check: <input type="radio"/> OK / <input type="radio"/> NOT OK |
| Interview Date: _____ |

Group Volunteer Application

Primary Contact Information

Name: _____ Date: _____

Preferred Name or Nickname: _____

Position in Group/Organization: _____

Preferred Phone: (____) ____ - ____ E-mail: _____

Group/Organization Information

Group/Organization Name: _____

Type of Organization: _____

Organization Address: _____

Do you need accommodations? If yes, please explain: _____

Please list Volunteer Names:
