



# Volunteer Application

(Please Fill out Completely in Print or Type)

## I. CONTACT INFORMATION

Mr.  
 Mrs. Name: \_\_\_\_\_ Date: \_\_\_\_\_  
 Ms.

Phone (home): \_\_\_\_\_ (business): \_\_\_\_\_ (cell): \_\_\_\_\_

Home Address: \_\_\_\_\_

City, State, and Zip: \_\_\_\_\_

E-mail Address: \_\_\_\_\_ Birth Date: \_\_\_\_\_

Employer/School: \_\_\_\_\_ Occupation: \_\_\_\_\_

Does your employer have a matching funds program tied to volunteering?  Yes  No  Unsure

Contact in case of emergency: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Do you require any specific accommodations? \_\_\_\_\_

### What is your level of interest in receiving agency communications?

(Information provided on this application will be entered into our database and used for periodic agency communication unless you opt out below.)

I don't wish to receive any mail (i.e. VOA newsletter)  I don't wish to receive any email (i.e. program updates)

## II. PLACEMENT

Is your volunteer service:  Personal interest  School related  Court ordered  Other \_\_\_\_\_

Are there a certain number of hours you prefer or are required to volunteer?  Yes  No If yes, how many? \_\_\_\_\_

Which do you prefer?  Long-Term Assignment  Short-Term Assignment  One-Time Project  Group Project

Availability: (Please check all that apply & indicate times)  Flexible Weekends:  Sat. ( \_\_\_ to \_\_\_ )  Sun. ( \_\_\_ to \_\_\_ )  
 Mon. ( \_\_\_ to \_\_\_ )  Tue. ( \_\_\_ to \_\_\_ )  Wed. ( \_\_\_ to \_\_\_ )  Thurs. ( \_\_\_ to \_\_\_ )  Fri. ( \_\_\_ to \_\_\_ )

### In which geographical area(s) are you interested in serving? (Please check all that apply)

NE Portland  Inner SE Portland  Outer SE Portland  Multiple Sites  No Preference

### What type(s) of volunteer service are you interested in offering? (Please check all that apply)

Client Support  Childcare  Group Facilitation  Visual/Performance Art  Grounds & Gardening  
 Staff Support  Administrative  Fundraising  Communications  Event Planning  Other: \_\_\_\_\_

### Which focus area(s) do you prefer? (Please check all that apply)

Substance Abuse Recovery  Public Safety/Rehabilitation  Latino Services  Women  Domestic Violence  
 Family Support  Young Adults  Senior Services  Admin/Development  Business Enterprises

### Do you have any special skills you would like to contribute? (Please check all that apply & indicate type)

Professional License: \_\_\_\_\_  Advanced Degree: \_\_\_\_\_  Trade: \_\_\_\_\_  
 Bi-Lingual: \_\_\_\_\_  Bi-Cultural: \_\_\_\_\_  Computer Skills  Other: \_\_\_\_\_

\*The completion of this section of the application is strictly voluntary and the completion or non-completion will not affect your volunteer work with Volunteers of America Oregon. This information will be used internally for reporting purposes.

**III. BACKGROUND**

What is your previous volunteer experience? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What do you hope to gain from volunteering with us? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**References** (please list people who know you well and can attest to your character, skills, and dependability):

**Name:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Name:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

Would you be willing to have a Criminal History check?  Yes  No

**How did you hear about us?**

- VOA Website
- VolunteerMatch
- Hands On Portland
- VOA Client
- VOA Event: \_\_\_\_\_
- Another Agency / School: \_\_\_\_\_
- Another Volunteer: \_\_\_\_\_
- Other: \_\_\_\_\_

**IV. AGREEMENT**

I certify that I have and will provide information throughout the volunteer selection process, including on this application and in interviews with Volunteers of America Oregon that is true, correct and complete to the best of my knowledge. I understand that misrepresentations or omissions may be cause for my immediate rejection as an applicant for a volunteer position with Volunteers of America Oregon or my termination as a volunteer.

I understand that information contained on my application will be verified by Volunteers of America Oregon and that appointment to a volunteer position may be contingent on the completion and review of a criminal history background check. I further authorize all persons, schools, companies, organizations, credit bureaus, and law enforcement agencies to supply all information concerning my background and to furnish reports thereon. I hereby release them and any organization affiliated with Volunteers of America Oregon from any and all liability and responsibility arising from their doing so. I understand that only Volunteers of America Human Resources staff will have access to the specific results of my criminal background check.

I understand that this is an application for and not a commitment or promise of volunteer opportunity. I understand that if placed I will be working with Volunteers of America Oregon personnel as a volunteer of my own volition, without compulsion or directions from the agency. Therefore, by execution of this agreement, which I hereby acknowledge that I have read and fully understood, I agree to hold Volunteers of America Oregon harmless to the extent allowed by law, and I waive, forego and otherwise agree not to hold the agency responsible for any loss, damage or injury which I may incur as a result of my volunteer work on behalf of the agency. I further agree to hold harmless to the extent allowed by law, defend and indemnify the Volunteers of America Oregon from any claims that are brought against them by any third parties that arise in any way, directly or indirectly, as a result of my volunteer work.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
(A legal guardian must sign for minors)

**V. APPLICATION INSTRUCTIONS**

- When applying to a specific posting, please send the completed application to the contact indicated on the posting.
- If you are submitting a general interest application or are unsure of the position contact, please contact:

○ Volunteer Services; 3910 SE Stark St. Portland, OR 97214; (503) 595-2009