Somerset Home for Temporarily Displaced Children
Volunteer Application

Name: _____ Date: _____

Address: _____

Previous Address if less than one year at above address: _____

_____

Phone: _____ Age: _____ Soc. Sec. #: _____

Do you have a car? _____ Drivers license #: _____

Marital status: single ____ married ____ divorced ____ widowed ____

Surname (if applicable): _____

Occupation: _____

Please indicate how you heard about the program/volunteer opportunity:
Raritan Valley Community College Service Learning Program _____
Rutgers University _____
Princeton Volunteers _____
Staff _____
Board Member _____
Other (please explain) _____

If this volunteer experience if for a course or otherwise mandated, **please indicate how many hours you are required to volunteer and for whom**: _____

Contact person/organization: _____

What hours/days are you interested in volunteering? Please list all: _____

_____

Do you have any previous volunteer experience? Please describe briefly indicating time of involvement, duties and name of organization. _____

_____

_____

_____

Please indicate all areas of interest for volunteer work:

Direct Services
Group Activities _____
Assistant Youth Counselor _____
Tutor _____
Arts & Crafts _____
Cooking _____
Mentor _____

Share Special Skill (explain) _____
Other Activity (please explain)_____

Administrative Services
Office Volunteer_____
Special Events _____
Computer Assistance_____
Mailings_____

Miscellaneous Services
Maintenance_____
Vehicle Maintenance_____
Painting_____
Planting_____
Kitchen Help _____

Project for a Day _____

Please list any special skills, interests and hobbies:_____

_____

_____

Reason for wanting to volunteer at the Somerset Home for Temporarily Displaced Children and what you wish to accomplish:_____

_____

_____

Educational Background:_____

_____

_____

Employment History (most recent first):

Employer:_____ Position:_____
Address:_____
Phone:_____ Dates of Employment: _____
May we contact your employer?_____

Employer:_____ Position:_____
Address:_____
Phone:_____ Dates of Employment: _____
May we contact your employer?_____

Employer: _____ Position: _____
Address: _____
Phone: _____Dates of Employment _____
May we contact your employer? _____

List three references other than relatives:

Name:_____ Relationship: _____
Address: _____
Phone: _____ Years Acquainted:_____

Name:_____ Relationship: _____
Address: _____
Phone: _____ Years Acquainted:_____

Name:_____ Relationship:_____
Address:_____
Phone: _____ Years Acquainted:_____

Have you ever been arrested?_____If so, please explain:_____

_____

Have you ever been convicted of a crime?_____If so, please explain:_____

_____

I certify that the answers provided by me herein are to the best of my knowledge and belief, true and correct. I further affirm that I have not knowingly withheld any facts or circumstances that would detrimentally affect this application. Should I become a volunteer I agree that I will not divulge to others or use form my own benefit any confidential information relating to clients without obtaining written permission from the Somerset Home for Temporarily Displaced Children.

Signature _____ Date _____