



**An Equal Opportunity Employer**

We do not discriminate on the basis of race, color, religion, national origin, sex, age, disability, or any other status protected by law or regulation. It is our intention that all qualified applicants will be given equal opportunity and that selection decisions will be based on job-related factors.

**Volunteer Application**

**Applicant Information**

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
Last First M.I.

Address: \_\_\_\_\_  
Street Address Apartment/Unit #  
\_\_\_\_\_  
City State ZIP Code

Phone: ( ) E-mail Address:

Have you ever been convicted of a felony? YES NO

If Yes, explain:

Which areas are you interested in volunteering?

- \_\_\_ Administration
- \_\_\_ Events
- \_\_\_ Field work
- \_\_\_ Fundraising
- \_\_\_ Deliveries
- \_\_\_ Phone bank
- \_\_\_ Newsletter production
- \_\_\_ Volunteer coordination

Date Available to start:

During which hours are you available for volunteer assignments?

Weekday:  
\_\_\_ mornings \_\_\_ afternoons \_\_\_ evenings

Weekend:  
\_\_\_ mornings \_\_\_ afternoons \_\_\_ evenings

**Education**

GED/HS: Address:  
From: To: Did you graduate? YES NO Degree:

College: Address:  
From: To: Did you graduate? YES NO Degree:

Other: Address:  
From: To: Did you graduate? YES NO Degree:

**References**

Please list three (3) professional references.

Name	Address	Telephone	E-mail

## Volunteer Application Pg. 2

### Previous Employment

Company: \_\_\_\_\_ Phone: (     ) \_\_\_\_\_  
Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_  
Responsibilities: \_\_\_\_\_  
From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_  
May we contact your previous supervisor for a reference?     YES     NO  
       

---

Company: \_\_\_\_\_ Phone: (     ) \_\_\_\_\_  
Address: \_\_\_\_\_ Supervisor: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Starting Salary: \$ \_\_\_\_\_ Ending Salary: \$ \_\_\_\_\_  
Responsibilities: \_\_\_\_\_  
From: \_\_\_\_\_ To: \_\_\_\_\_ Reason for Leaving: \_\_\_\_\_  
May we contact your previous supervisor for a reference?     YES     NO  
       

---

### Special Skills or Qualifications

Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports.

### Previous Volunteer Experience

Summarize your previous volunteer experience.

### Person to Contact in Case of an Emergency

Full Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Relationship: \_\_\_\_\_  
Phone: (     ) \_\_\_\_\_  
Cellular Phone: (     ) \_\_\_\_\_

## Volunteer Application Pg. 3

### Affidavit, Consent and Release

PLEASE READ EACH STATEMENT CAREFULLY BEFORE SIGNING.

I certify that all information provided in this volunteer application is true and complete. I understand that any false information or omission may disqualify me from further consideration for volunteer work and may result in my dismissal if discovered at a later date.

I authorize the investigation of any or all statements contained in this application. I also authorize, whether listed or not, any person, school, current employer, past employers, and organizations to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements.

I understand I may be required to successfully pass a drug screening examination. I hereby consent to a pre- and/or post-employment drug screen as a condition of employment, if required.

I understand that if I am extended an offer of employment it may be conditioned upon my successfully passing a complete pre-employment physical examination. I consent to the release of any or all medical information as may be deemed necessary to judge my capability to do the work for which I am applying.

**I understand that this application for volunteering, verbal statements by management, or subsequent employment does not create an express or implied contract of employment nor guarantee volunteering duties for any definite period of time. Only the HR Department pursuant to SMART, Inc. authorization has the authority to enter into an agreement of employment for any specified period and such agreement must be in writing, signed by the HR Department and the employee. If employed, I understand that I have been hired at the will of the employer and my volunteering duties may be terminated at any time, with or without reason and with or without notice.**

I have read, understand, and by my signature consent to these statements.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Thank you for completing this application form and for your interest in volunteering with us.