



HOME FOR WOMEN & CHILDREN

507-833-8310

400 2nd Ave NW, Waseca, MN 56093

VOLUNTEER APPLICATION

Applicant Information

Name: _____ Preferred Name: _____

Address: _____

Telephone: Home: _____ Cell: _____

Email: _____

Languages Spoken (other than English) _____

Volunteer Experiences

Please list any volunteer experiences you have:

Do you have past experiences (work, school, volunteer) related to Homelessness, Domestic Violence, Addiction or Poverty? If yes, please explain: _____

Areas of Interest

- | | | |
|---|---|--|
| <input type="checkbox"/> Child Care | <input type="checkbox"/> Miscellaneous Activities | <input type="checkbox"/> Moving Tenants |
| <input type="checkbox"/> Clerical | <input type="checkbox"/> Computer Support | <input type="checkbox"/> Fundraising |
| <input type="checkbox"/> Household Help | <input type="checkbox"/> Custodial | <input type="checkbox"/> Fall Lawn Cleanup |

Volunteer Availability (weekdays, weeknights, weekends, as needed, etc.): _____

References

Please provide two references. One may be personal but please no family members.

Name: _____ Relationship: _____

Address: _____

Daytime Phone: _____

Name: _____ Relationship: _____

Address: _____

Daytime Phone: _____

Disclaimer and Signature

All the information given here is true. I realize that the identity and circumstances of any client or family that I encounter through my association with this agency must be kept completely confidential. My signature also gives Bethlehem Inn permission to contact my references.

Signature

Date