



Volunteer Application Form

Date: _____ Name: _____

Address: _____

City: _____ State: _____ Postal code: _____

Country: _____ Work place: _____

Date of birth: _____ Passport: _____

Marital status: _____ Religion: _____

Phone: _____ Email: _____



Occupation (previous if retired): _____

Volunteer experience: _____

Additional information: _____

Language(s): _____

Availability (please check all that apply):

Mornings (Mon – Fri) Afternoons (Mon – Fri) Evenings (Mon – Fri)

Weekends One time only Once/week

More than once/week As needed Other



Special skills (any skills or education that may benefit Peace Transitional Home during, e.g. teaching, construction, fundraising): _____

Do you have a valid state driver license? Yes No

Have you ever been convicted for violation of any laws, traffic or otherwise?

Yes No **If yes, please explain:** _____

Have you ever had a disciplinary sanction from a volunteering or other governing body? Relating to inappropriate behaviour with children? Yes No

If yes, please explain: _____

Do you have a physical condition that may limit your activities? Yes No

If yes, describe: _____

Who should we notify in case of emergency?

Name: _____ **Phone:** _____

Email: _____



Please list three people we may call for references. They may not be family members or personal friends, but can be your religious or spiritual leader, teacher, or employer.

1. Name: _____ Relationship: _____

Phone: _____ Email: _____

Comments: _____

2. Name: _____ Relationship: _____

Phone: _____ Email: _____

Comments: _____

3. Name: _____ Relationship: _____

Phone: _____ Email: _____

Comments: _____

Volunteer Dates:

Arrival: _____ Departure: _____



I hereby give my consent for Peace Transitional Home to contact my references and my past/present employer to conduct a background check.

Applicant signature

Date