

**VOLUNTEER APPLICATION**

First name: \_\_\_\_\_ Middle Initial:-----'

Last Name: \_\_\_\_\_ Nickname: \_\_\_\_\_

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

City/Zip. \_\_\_\_\_

Phone/Home: \_\_\_\_\_ Cell \_\_\_\_\_ Email \_\_\_\_\_

*Please circle the number where you prefer to be called during office hours:*

**Please respond to the following:**

Do you have a valid Georgia Driver's License? \_\_\_\_ Yes \_\_\_\_ No

Have you ever been convicted of a crime of violence against adults or children, stalking, or sexual misconduct or assault? \_\_\_\_\_ Yes \_\_\_\_ No

If Yes, explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Note: Due to the nature of our services, volunteers with significant contact with clients may be asked to undergo a Criminal Background. All applicants will have a personal interview.

**Why do you want to be a Volunteer with Family Haven, Inc.?**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please list three (3) persons who have known you for at least three years and who will provide a reference for you if requested:

*Name* \_\_\_\_\_ *Address* \_\_\_\_\_ *Phone* \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_