



EMPLOYEE/VOLUNTEER Application

Contact Information

Name: _____ Social Security# _____

Street Address: _____

City, ST ZIP Code: _____

Home Phone: _____

Work Phone: _____

E-Mail Address: _____

Availability

____:____ to ____:____ Monday _____:_____ to _____:_____ Thursday

____:____ to ____:____ Tuesday _____:_____ to _____:_____ Friday

____:____ to ____:____ Wednesday _____:_____ to _____:_____ Saturday

Interests

In which areas are you best suited to volunteer?

- | | | |
|--|--|--|
| <input type="checkbox"/> Arts/Crafts | <input type="checkbox"/> Gardening | <input type="checkbox"/> Meal Service |
| <input type="checkbox"/> Literacy/Reading | <input type="checkbox"/> Leadership | <input type="checkbox"/> Health/ Wellness |
| <input type="checkbox"/> Vocational Training | <input type="checkbox"/> Mentoring | <input type="checkbox"/> Seniors |
| <input type="checkbox"/> Fundraising | <input type="checkbox"/> Disability Services | <input type="checkbox"/> Youth
Volunteering |
| <input type="checkbox"/> Carpentry/Light Handyman Work | <input type="checkbox"/> Board Member | <input type="checkbox"/> Computer Work |

Special Certifications/Licenses

Please list any professional certification or licenses that you may hold.



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Special Skills or Qualifications

Skills and qualifications can be acquired through employment, previous volunteer work, or other activities such as hobbies or sports. What skills or qualifications do you have as an (circle one) employee/ volunteer?

Previous Employee/Volunteer Experience

Have you worked as an (circle one) employee/ volunteer before? If so, what did you do?

Person to Notify in Case of Emergency

Name: _____ Street Address: _____

City, ST ZIP Code: _____ Home Phone: _____

Work Phone: _____ E-Mail Address: _____

Our Policy

Ben's Place Services, Inc. is an equal opportunity organization and will not discriminate on the basis of race, color, national origin, religion, age, gender, marital status, height, weight or disability.

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as an (circle one) employee/volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

Signature: _____ **Date:** _____