



Today's Date:

Personal Information

Name:

Address:

City:

State:

Zip:

Home Phone:

Work Phone:

Cell Phone:

Email:

Age ___over 18

___under 18

DOB_____

Experience and Education

What is your educational/training background?

Have you had any previous experience as a volunteer? If so, with what organizations, and what kind of work did you do?

Current Profession:

Your Interests at *The Red Tent Women's Initiative*

How did you hear about us?

How long can you commit to volunteering? One time Occasionally 3-6 months

6 months or more Other _____

Do you prefer to work (check all that apply) Directly with people served Behind the scenes
Computers No preference

Do you have any special needs or restrictions we should be aware of?:

Date you can begin service:

Criminal History

All volunteer positions require a Criminal History check. Conviction will not necessarily disqualify you from participating. Have you ever been convicted of a felony? Yes No

If yes, explain.

Please describe in 3-5 sentences why you want to be a volunteer or intern at *The Red Tent Women's Initiative*

Why, at this particular time in your life have you chosen to volunteer with us? What do you hope to gain from being a volunteer?

The Red Tent Women's Initiative considers applicants for internships/volunteering without regard to sex, race, age, religion, national origin, veteran or marital status, or any other legally protected status. We provide reasonable accommodation to qualified individuals with disabilities when it would not be an undue hardship.

AUTHORIZATION AND AGREEMENT BY APPLICANT

1. I certify that the facts set for in this volunteer application are true and complete to the best of my knowledge. I understand that any false statement, omission or misrepresentation in my application or placement interview may result in the rejection of my application or discharge from the volunteer program.
2. I consent to having *The Red Tent Women's Initiative* complete a criminal background check prior to volunteering.
3. I agree to complete a drug screening and TB screening requirements relevant to the position for which I am applying

Signature of Applicant

Date

Parent/Guardian Signature (required if less than 18 years of age) Date

DRUG AND ALCOHOL TESTING CONSENT