



P.O. Box 425, Idyllwild, CA 92549
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VOLUNTEER APPLICATION

Name: _____

Date: _____

Address: _____

City: _____ State: _____

Zip code: _____

Home phone: _() _____ Work phone: _() _____ Cell: _() _____

Have you been convicted of a felony within the past five years? _____ Yes _____ No

If yes, please explain: _____

Are you a student? _____ Yes _____ No

What school do you attend? _____

Have you done volunteer work at another nonprofit? _____ Yes _____ No

If yes, where and what did you do?

What type of work would you like to do here?

List any hobbies or interests:

What skills, training, or knowledge do you wish to utilize here?

Why do you want to volunteer here?

Where did you hear about our Agency?

When are you available to volunteer and for how long?

If you have a disability, what accommodation would you need to do this volunteer position?

What training, resources or support do you anticipate needing to do this volunteer work?

Please provide 3 personal or professional references:

Name	phone number	personal or professional relationship
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1.

2.

3.

I hereby attest that the above information is true to the best of my knowledge.

Signature

Today's date