



Orientation \_\_\_\_\_  
Training date \_\_\_\_\_  
Handbook \_\_\_\_\_  
Uniform \_\_\_\_\_  
Key \_\_\_\_\_  
Data base \_\_\_\_\_ Vol # \_\_\_\_\_  
Org. \_\_\_\_\_ Survey \_\_\_\_\_

## HUMAN SERVICES CAMPUS VOLUNTEER APPLICATION

Thank you for your interest in volunteering with the Human Services Campus (HSC). We appreciate the dedicated community members such as you who have a desire to partner with us in our efforts to end homelessness. In order to ensure that you are matched with the best possible volunteer opportunity for your skills and interests, we appreciate you completing this application. All information supplied remains confidential under The Data Protection Act 1988.

DATE \_\_\_\_\_ START DATE \_\_\_\_\_

LAST NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE (mobile if available): \_\_\_\_\_ DOB \_\_\_\_\_

EMAIL: \_\_\_\_\_ T-SHIRT SIZE: S M L XL XXL

How did you hear about us? \_\_\_\_\_

Opportunity you are interested in? \_\_\_\_\_

Your skills and interests? \_\_\_\_\_

Have you been a volunteer before? YES  NO

If YES, please describe: \_\_\_\_\_

Please tell us why you would like to volunteer for the HSC? \_\_\_\_\_

Please tell us your available days and hours: **MON** 8-11 1-4 **TUES** 8-11 1-4 **WED** 8-11 1-4  
**THURS** 8-11 1-4 **FRI** 8-11 1-4 **SAT** 8-11 1-4 **SUN** 8-11 1-4

References: Please list two references – character or professional.

1. Name : \_\_\_\_\_ Relationship: \_\_\_\_\_

Years known : \_\_\_\_\_ Phone : \_\_\_\_\_ Email : \_\_\_\_\_

2. Name : \_\_\_\_\_ Relationship: \_\_\_\_\_

Years known : \_\_\_\_\_ Phone : \_\_\_\_\_ Email : \_\_\_\_\_