



Volunteer Application

Name: _____ Date of Birth: ____/____/____
Last First Middle Month Day Year

Address: _____ Apt. _____ Email: _____

City: _____ State: _____ Zip Code: _____

Phone #: Days () _____ Evenings: () _____ Cell: () _____

Notify in Case of an Emergency: _____ Phone: _____

Driver's License Number and State _____

(Jane's Place, Inc. Allegany County Child Advocacy Center, does not discriminate on the basis of a person's race, religion, age, sex, national origin, disability, marital status or Vietnam-era status regarding volunteer opportunities. This information is for reporting only.)

Race (please circle one): African-American Caucasian Asian Hispanic Other: _____

Sex (please circle one): Male Female Prefer not to answer Marital Status _____ Number of Children _____

Ages of Children 0-5 6-12 13-18 19+

1. What areas are you interested in? (Please check each area in which you would be willing to volunteer)

- General Office (phones, filing, mail outs) Fundraising Committee Special Events
 Canvassing Cumberland Maintenance Soliciting Donations
 Other: (explain) _____

2. What days of the week are you available?

- Monday Tuesday Wednesday Thursday Friday Saturday

3. Which time of day do you prefer?

- Mornings Afternoons

4. How often are you willing to be scheduled?

- Once a Week Once every two weeks Once a month When Needed

5. Volunteer Experience:



6. Why would you like to volunteer with Jane's Place Inc., Allegany Child Advocacy Center?

7. Have you ever experienced any abuse? If yes, please explain:

8. Have you ever been convicted of any charges other than minor traffic violations? If yes, please explain:

9. Please list three (3) references with telephone numbers:

1. _____
2. _____
3. _____

10. I have completed the following list of items to be considered for a volunteer position:

- Volunteer Application
- Volunteer Consent Form for Background Check
- Volunteer Policy
- I have included a photocopy of my State issued ID

Please return all papers to: Jane's Place, Inc. Allegany Child Advocacy Center
26 Greene Street
Cumberland, MD 21502