



# C. WALDO SCOTT CENTER FOR H.O.P.E.

## VOLUNTEER APPLICATION

As a normal part of the volunteer/mentoring recruitment procedure, we reserve the right to make such background checks (police, employment, CPS, etc.) as we deem appropriate on the suitability of any new volunteer who will be working with Scott Center youth. It is our policy to treat volunteers with the same seriousness and consideration given the professional staff. We trust you will understand this in the spirit intended. Any checks will be made in a manner designed not to cause you embarrassment, but please feel free to discuss any concern with the Scott Center Administration prior to proceeding with the application process.

Date of Application: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_  
Last First MI (Maiden, if applicable)

Address: \_\_\_\_\_

\_\_\_\_\_ City State Zip Code

Home phone #: \_\_\_\_\_ Alternate phone #: \_\_\_\_\_

Please check: Adult Volunteer \_\_\_\_\_ Youth Volunteer \_\_\_\_\_ (under 18 years old)

Emergency Contact Person: (Name) \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

### EDUCATION:

Please circle the highest grade completed: 1 2 3 4 5 6 7 8 9 10 11 12 or GED

### Post High School Education:

Name of School	Location (City/State)	Date of Completion (Month/year)	Degree Received

Special Training or Professional License: \_\_\_\_\_

### EMPLOYMENT EXPERIENCE:

Present Employer: \_\_\_\_\_

Position: \_\_\_\_\_

Past Employer: \_\_\_\_\_

Position: \_\_\_\_\_

**VOLUNTEER EXPERIENCE:**

Name of Volunteer Placement	Date of Volunteer Service	Duties/Responsibilities as a Volunteer

How many hours per week can you commit to volunteer service at the Scott Center: \_\_\_\_\_

Please circle days and indicate times you are available:

MON \_\_\_\_\_ TUES \_\_\_\_\_ WED \_\_\_\_\_ THURS \_\_\_\_\_ FRI \_\_\_\_\_ SAT \_\_\_\_\_

What age group(s) are you interested in working with:

6-9 year olds \_\_\_\_\_ 10-13 year olds \_\_\_\_\_ 14-18 year olds \_\_\_\_\_ Adults \_\_\_\_\_

What would you like to achieve through your volunteer experience at the Scott Center? \_\_\_\_\_

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**REFERENCES:** List names, addresses, and phone numbers of at least two (2) people not related to you who can give information about your character and work ethic:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

Please indicate any additional information that would be helpful to the Scott Center in considering your volunteer application:

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