

Huntington City Mission

Individual Volunteer Application

624 10th Street

Huntington, WV 25701

(304) 523-0293

Date _____

Name _____

(First)

(MI)

(Last)

Address _____

(Street)

(City)

(State)

(Zip)

Phone (day) _____ Phone (eve) _____ Email address: _____

Sex _____ Birth Date _____ Church _____

Place of employment/school _____

Why do you want to volunteer at Huntington City Mission? _____

Type of work preferred and times available _____

Use the space below to tell us about you, including experiences and, skills or hobbies that you think may be useful.

Have you ever been convicted of a violent crime or a felony of any sort? YES or NO if yes please provide detailed information

Training _____

1 Reference (name address phone) _____

2 Reference (name address phone) _____

Degrees/certificates _____

I understand that as a volunteer I am subject to the policies of the Huntington City Mission. General policies include, but are not limited to: confidentiality of guest information, drug free workplace, and dress code. I also understand that as a volunteer, I am not due any compensation for my labor, but am expected to act in a professional manner and behave respectfully towards other volunteers, staff and guests of the Huntington City Mission. I hereby release Huntington City Mission, its Board of Directors, employees and other volunteer workers from any and all liability that might arise by virtue of all personal injury, property damage or other damage that might result from the use of said facility.

Applicant's Signature: _____ Date _____

Parent or Guardian Signature (if under 18): _____ Date _____

If Guardian, state relationship: _____

Volunteer Supervisor's Signature: _____ Date _____