INTERFAITH Volunteers

Volunteer Application

Please fill out the following information:

Name:_____**Date:**_____

Address:_____**Congregation:**_____

City/State/Zip:_____**Birthday:**_____

Phone(Home):_____**Cell:**_____

E-mail Address:_____

I am willing to provide the following services: (Check all that apply)

□ Transportation/Rides (Local) □ Friendly/Companionship Visits

□ Ramp Building □ Minor Home Modification

Driver Information:

Do you have a valid driver's license? □ Yes □ No

If yes, license number: _____

Auto Insurance Company: _____

Policy Number: _____

Background Information:

Has your license ever been revoked? □ Yes □ No

Have you ever been convicted of a crime (other than a minor traffic violation)? □ Yes □ No

If yes, please explain on a separate page.

Volunteer Preferences:

Do you have a preferred time to volunteer? □ Yes □ No

If yes, please specify: _____

How often would you like to volunteer? _____

I *cannot* drive on these specific weekdays: _____

Best number to call: □ Home □ Cell

Best time to call: _____

□ I understand that a criminal background check will be performed to be considered as an Interfaith Volunteer.

Signature and date: _____

Mail to: Interfaith Volunteers, PO Box 64, Deerwood, MN, 56444