

CIRCLE VOLUNTEER APPLICATION

Name: _____ Date _____ Are you 18 or over ___yes___no

Address: _____

Home Phone: _____ Work Phone: _____ May we call you at work ___yes___no

Employer: _____

Occupation: _____ Work schedule: _____

Education: _____

How did you hear of Circle? _____

Have you ever applied to be a volunteer at Circle: _____Yes _____No

How did you become interested in becoming a volunteer in the field of domestic violence? _____

What does being non-judgmental mean to you? _____

Describe any personal, educational, work or volunteer experiences that you feel may be helpful at Circle? _____

Please explain any special time requirements or physical limitations you might have: _____

Days and hours available: _____

Skills, interests and hobbies: _____

Have you ever been convicted of a crime? _____ If so, how long ago? _____

Please explain the nature of the crime: _____

Please provide the name, address and telephone number of one professional person and one former employer who could be asked for a reference:

Name: _____ Telephone Number: _____

Address: _____

Name: _____ Telephone Number: _____

Address: _____

I attest that all the information I have provided here is as complete and accurate as possible. Furthermore, I acknowledge that acceptance as a Circle volunteer is dependent upon my meeting all Circle's criteria in the training program.

Signature _____