

9104 Red Branch Road
Columbia, Maryland 21045
410-964-1241
VOLUNTEER APPLICATION

Name _____ Date _____
 Address _____ City _____ Zip _____
 Home phone _____ Work phone _____
 E-mail address _____ May we call you at work? (Check for yes)
 Special training, skills, hobbies _____
 Groups, clubs, organizational membership _____
 Previous volunteer experience _____

Why do you want to take part in volunteer activities? _____
 What experiences have you had that may prepare you to work as a volunteer with people with developmental disabilities? _____

In which of the following would you like to participate (Check one or more)

- Vocational workshop assistant Activities assistant Personal mentor
 Community mobility activities Special events Special projects
 Facilities maintenance Guest speaker/training facilitator Fundraising
 Administrative assistant

Driver's License? (Check for yes) Car Insurance? (Check for yes)

Car available for transporting others? (Check for yes)

Times available (check any time slots when you could be available)

Day/Time	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
7am-12pm							
12pm-3pm							
3pm-7pm							
7pm-10pm							

REFERENCES: Please list three professional and/or personal (not including relatives) references below. References will remain confidential.

Name/Relationship	Address	Phone

How did you hear about this volunteer experience?

Signature _____

This agreement is intended to indicate the seriousness with which we treat our volunteers. The intent of the agreement is both to assure you of our deep appreciation for your services and to indicate our commitment to do the very best we can to make your volunteer experience here a productive and rewarding one.

I. Agency

We, _____ (agency) agree to accept the service of _____ (volunteer) beginning ___/___/___, and we commit to the following:

1. To provide adequate information, training, and assistance for the volunteer to be able to meet the responsibilities of his/her position
2. To ensure diligent supervisory aid to the volunteer and to provide feedback on his/her performance
3. To respect the skills, dignity, and individual needs of the volunteer, and to do our best to adjust to these individual requirements
4. To be receptive to any comments from the volunteer regarding ways in which we might mutually better accomplish our respective tasks
5. To treat the volunteer as an equal partner with agency staff, jointly responsible for accomplishment of the agency mission

II. Volunteer

I, _____, agree to serve as a volunteer and commit to the following:

1. To perform my volunteer duties to the best of my ability
2. To adhere to agency rules and procedures, including recordkeeping requirements and confidentiality of agency and client information.
3. To meet time and duty commitment, or to provide adequate notice so that alternate arrangements can be made
4. To act at all times as a member of the team responsible for accomplishing the mission of the agency.

III. Agreed to:

Volunteer: _____ Date: _____

Agency Representative: _____ Date: _____