



Volunteer Application

Contact Information

Name:

Street Address:

City, ST ZIP Code:

Home Phone:

Work Phone:

E-Mail Address:

Current Employer:

Address:

Supervisor:

Phone:

Availability

When are you available for volunteer work?

____:____ to ____:____ Monday ____:____ to ____:____ Thursday
____:____ to ____:____ Tuesday ____:____ to ____:____ Friday
____:____ to ____:____ Wednesday ____:____ to ____:____ Saturday

Special Skills or Qualifications

Skills and qualifications can be acquired through employment, previous volunteer work, or other talents such as hobbies or sports. What skills or qualifications do you have as a volunteer?

References – Provide 2 references who know your character

1. Name

How do they know you?

Phone

Email

2. Name

How do they know you?

Phone

Email

Volunteer questions

Have you worked as a volunteer before? List the volunteer places and duties you consider most relevant.

Why are you interested in serving with AKZ, and what area would you like to serve in?

Person to Notify in Case of Emergency

Name:

Street Address:

City, ST ZIP Code:

Home Phone:

Work Phone:

Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

AKZ seeks to break the cycle of poverty by focusing on the next generation with educational and social support structures that provide opportunities for kids that are disadvantaged. AKZ's purpose is to help kids succeed, no exceptions, no excuses.

Thank you for completing this application form and for your interest in volunteering with us.

Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal. I also agree to the use of my photograph/video in any promotional items for AKZ.

Signature: _____ **Date:** _____