



**Volunteer Application**

Date:			
First Name:			
Last Name:			
Street Address:			
City:	State:	Postal Code:	
Home Phone:			
Other Phone:			
Email:			
Current Occupation:			

How did you hear about Project Interfaith?

- Newspaper     
  Brochure     
  Website     
  Friend     
  Other (specify) \_\_\_\_\_

Day of time available—check all times when you can volunteer:

- Mornings:     M     T     W     Th     F     Sat     Sun  
 Afternoons:    M     T     W     Th     F     Sat     Sun  
 Evenings:      M     T     W     Th     F     Sat     Sun  
 Days/Times not available: \_\_\_\_\_

How do you wish to contribute?\*( check one or more)

- |   |   |
|---|---|
| <input type="checkbox"/> Board Member                 | <input type="checkbox"/> Advisory Council Member          |
| <input type="checkbox"/> Development Committee Member | <input type="checkbox"/> Communications Committee Member  |
| <input type="checkbox"/> Finance Committee Member     | <input type="checkbox"/> Human Resources Committee Member |
| <input type="checkbox"/> Office Support               | <input type="checkbox"/> Program Check-in                 |
| <input type="checkbox"/> Data Entry                   | <input type="checkbox"/> Event Set Up/tear Down           |
| <input type="checkbox"/> Mailings                     | <input type="checkbox"/> Fundraising                      |
| <input type="checkbox"/> Website Maintenance          | <input type="checkbox"/> Research                         |
| <input type="checkbox"/> Intern                       |   |

\*Please note: Project Interfaith does not provide transportation for its volunteers. Thank you for understanding.

Please describe any special skills or training you bring to this position:

Please list any hobbies or recreational interests:

Why do you want to volunteer for Project Interfaith?

How do you wish to be thanked for your volunteer efforts?

**Employment History:**

Name of employer: \_\_\_\_\_

Dates of employment: \_\_\_\_\_

Position/Job description:

\_\_\_\_\_  
\_\_\_\_\_

Name of employer: \_\_\_\_\_

Dates of employment: \_\_\_\_\_

Position/Job description:

\_\_\_\_\_  
\_\_\_\_\_

Name of employer: \_\_\_\_\_

Dates of employment: \_\_\_\_\_

Position/Job description:

\_\_\_\_\_

\_\_\_\_\_

**Education History:**

Type of school: \_\_\_\_\_

Name of school: \_\_\_\_\_

Location: \_\_\_\_\_

Years attended: \_\_\_\_\_

Qualifications obtained: \_\_\_\_\_

Type of school: \_\_\_\_\_

Name of school: \_\_\_\_\_

Location: \_\_\_\_\_

Years attended: \_\_\_\_\_

Qualifications obtained: \_\_\_\_\_

**Emergency Contact Information:**

Name: \_\_\_\_\_ Phone number: \_\_\_\_\_ Relationship: \_\_\_\_\_

Is there any other important information that Project Interfaith should be aware of? (i.e. medical concerns) If so, please list below:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Applicant requirements:**

1. Signed confidentiality statement
2. Agreement to participate in orientation session and training specific to the position
3. Depending on the volunteer position, a criminal reference check from a law enforcement agency
4. Two (2) references (not family)- please list below:

Reference #1:

Name:			
Street Address:			
City:		State:	Postal Code:
Home Phone:			
Other Phone:			
Email:			
Relationship:			

Reference #2:

Name:			
Street Address:			
City:		State:	Postal Code:
Home Phone:			
Other Phone:			
Email:			
Relationship:			

Thank you for your interest in volunteering with Project Interfaith. A staff member will be contacting you shortly regarding your application. If you have additional questions or for more information about how you can help as a volunteer, please contact us by emailing [info@projectinterfaithusa.org](mailto:info@projectinterfaithusa.org) or calling (402) 933-4647.



### **VOLUNTEER CONFIDENTIALITY POLICY**

1. I acknowledge and confirm that as a volunteer I may acquire information on Project Interfaith, its contributors, staff and volunteers, and about certain matters and things which are of a confidential nature and that such information is the exclusive property of Project Interfaith and will remain in the strictest confidence. Such information may include, but is not limited to, the names and addresses of individuals and/or entities Project Interfaith solicits and/or receives contributions, as well as the amount of the contributions, if any.
2. I affirm that the information referred to above could be used to the detriment of Project Interfaith and/or the volunteer activities and thereby undertake to treat as confidential all information, contracts or resources. I agree not to disclose the same to any third party either during the term I am volunteering for Project Interfaith or at any time thereafter unless required by law to do so.
3. I agree that any knowledge gained as a result of my position will remain in strictest confidence.
4. I agree to exercise due care to ensure that any information I may give to others in the course of my duties as a volunteer or otherwise is information that is required to be given and is given to a party entitled to receive such information.
5. I recognize that the disclosure of such information by me may cause irreparable harm to Project Interfaith and accordingly, Project Interfaith may seek any legal remedies against me which may be available.
6. I confirm that I have read the above statements and agree with them and I will therefore adhere to all confidential requirements contained in this agreement or as may be otherwise directed to me, verbally and/or in writing by my supervisor as a volunteer.

\_\_\_\_\_  
Print name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date