Help-In-Crisis Volunteer Application

(for Scholarship / Community Service Hours)

Name:		Date:				
Address:						
Email:	Phone Number:					
Are you over the age of 18? yellow and the large you ever been convicted of a convicted of a convicted of a convicted will you submit to a background che	rime?	_ yes	no	_)		
Emergency Contact Information:	Phone #: _					
Have you volunteered with Help-In-Crisis before?			_ yes s:			
Scholarship Affiliation:						
Contact Information:						
(Name)		(Title)			(Phone #)	
What areas of volunteer service interest you?			_ lawn care _ clerical _ outreach _ fund raising	misc requ	projects uests for service	
Dates of Availability:						
Special skills / hobbies / interests:	 Crafting (crochet, quilting, knitting, etc) Computer science / Information Technology Maintenance (carpenter, electrician, painter, etc) Art (painting, home décor, etc) Children's services Other 					
Would you be interested in receiving Crisis-line Transportation Assistance Children's Services	g training in t	he follo	owing areas: Violence Adv	ocate		