DATE:
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## **Volunteer Application**

Special events are usually held after business hours and/or on weekends.

Name:	:		
Home	address		
City:		State:	Zip:
Day phone :		Cell:	
Email:		please co	ontact me via: phone email
Intere	sts: (check all that apply)		
	Board member Special event volunteer (planning committee and/or day-of) Office/clerical/administrative Facility Maintenance (indoor and outdoor) Other:		
Skills:	Basic Office programs Other software: Carpentry, landscaping Other:		
Why d	lo you want to volunteer? What do you w	vant to gain from	this volunteer experience?
Do you	u have any previous volunteer experience	e? Please describe	e:

<b>Your availability: (circl</b> Monday Tuesda		<b>oply)</b> /ednesday	Thursday	Friday	Saturday	Sunday
Preferred time availabl	e:					_
Are you able to lift 30 l	bs?	Yes No				
Do you have a driver's Do you have car insura		No □ Ye				
<b>REFERENCES</b> Please list three people	who know	you well and	can attest to	your character, s	kills, and depend	dability.
Name/Organization	Rela	Relationship to you		of relationship	Phone number	
EMPLOYMENT						
Current Employer, if appropriate Current Employer, if appropriate Employer.	-					
Please read the follow I understand that this i certify that I have and a application for a volunt true, correct and comp questions to the best o unfavorably affect my a my application will be a cause for my immediat termination as a volunt	s an applica will provide eer position lete to the f my ability application verified by the e rejection	ation for and nation to an and in intervious to the standard of my know and that I have for a voluntee WDMHS. I und	ot a commitment of a commitment of the commitmen	nent or promise of e selection proces e West Des Moin tify that I have a Il not withhold ar inderstand that in misrepresentation	ess, including on es Historical Soci nd will answer a ny information th nformation conta ons or omissions	this lety that is II nat would ained on
ignature Date						

DATE:\_\_\_\_\_