



Volunteer Application

We do not discriminate based on race, color, religion, national origin, sex, age or disability. It is our intention that all qualified volunteers are given equal opportunity, and that selection decisions be based on organizational needs, qualifications and availability of the volunteer.

Answer each question **fully and accurately.**

Today's Date _____

Availability

When are you available for volunteer assignments?

Monday	Start time	End Time
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		
Sunday		

(Last Name) (First Name) (MI) (Telephone Number)

Email address: _____

(Present Street Address) (City) (State) (Zip Code)

Are you 18 years of age or older? Yes ___ No ___

If required, can you submit proof of age? Yes ___ No ___

Have you ever worked/volunteered at WMH before? Yes ___ No ___ If yes, when? _____

Have you ever been arrested for **any** law violation, (not to include **minor** traffic violations)
 Yes _____ No _____

If yes, please give details:

(A 'yes' answer does not automatically disqualify you from employment since the nature of the offense; date and job you are applying for are also considered.)

Are you currently employed? Yes ___ No ___ If so, where? _____



EDUCATION (please list all that apply)

School/University	What years did you attend? (example 2002-2004)	Certification/Diploma/Degree Received

In which areas are you best suited to volunteer?

Nursing
 Clerical
 Radiology
 EMS
 Auxillary
 Lab
 Clinic

Why would you like to volunteer at Weems? _____

As a volunteer, you will be required to provide health information, consent to a drug screen, background check and proof of certain immunizations.

References: Please list three references (do not list relatives)

Name	Length of time this individual has known you	Email or mailing address	Personal or Professional Reference



PLEASE READ EACH STATEMENT CAREFULLY BEFORE SIGNING

I certify that all information provided in this volunteer application is true and complete. I understand that any false information or omissions may disqualify me from further consideration for volunteering and may result in my dismissal, if discovered later. I understand that Weems may request an investigative consumer report from a consumer reporting and/or law enforcement agency. This report may include information as to my character, reputation, personal characteristics, and mode of living obtained from interviews with neighbors, friends, former employers, schools and others. I understand that I have a right to make a written request within a reasonable time for the disclosure of the name and address of the consumer reporting agency, so that I may obtain a complete disclosure of the nature and scope of the investigation.

I authorize the investigation and all statements contained in this application. I also authorize whether listed or not, any person, school, currently employer, past employers, and organizations to provide relevant information and opinions that may be useful in making a hiring decision. I release such persons and organizations from any legal liability in making such statements. I understand that if I am extended an offer to volunteer, it may be conditioned upon my successfully passing a complete pre-employment physical examination. I consent to the release of all medical information as may be deemed necessary to judge my capability to do the volunteering for which I am applying. I understand that I may be required to successfully pass a drug screening examination. I hereby, consent to a pre, post and/or random drug screen, as a condition of volunteering if required.

I understand this application does not create a contract of employment, nor guarantee employment for any period. If selected, I understand I will be authorized to volunteer at the specific discretion/times/locations, etc of Weems and my volunteer capacity may be terminated at any time, with or without cause and with, or without notice.

Signature: _____ Date: _____