



Volunteer Information Form

Please complete the following information form. Although some of these questions may feel invasive, they are necessary for the protection of our clients and in the processing of references and Criminal Background Information. Confidentiality is important to our organization and yours will be respected. Your cooperation is appreciated!

How did you hear about us?			
Name:		Date:	
Address:		# Years There:	
City, State, Zip:	Home Phone:	Mobile Phone:	
Business Phone:	Email:	Fax Number:	
Date of Birth:	Birthplace (City & State):		
Place of Employment:	Position:	#Years There:	
Supervisor's Name:		Phone Number:	
Business Address:		City, State, Zip:	
# of Children:	Names/Ages:	Do your children live with you?	
Height:	Weight (approx):	Eye Color:	Hair Color:
Race: <input type="checkbox"/> Anglo <input type="checkbox"/> African-American <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Native American <input type="checkbox"/> Other			
Social Security Number:	Driver's License #/State:	Other (Student ID):	
In the event of an emergency, contact:			
Name:	Relationship:	Phone #:	
Do you expect any changes in marital status, employment or residence within the next year? Yes <input type="checkbox"/> No <input type="checkbox"/>			
Please respond to the following questions. An affirmative response will not necessarily prevent or restrict volunteer activities:			
1. Do you use illegal drugs?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
2. Have you ever been convicted of a criminal offense?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
3. Have you ever been charged with neglect, abuse or assault?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
4. Has your driver's license ever been suspended or revoked in any state?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
If you responded "yes" to any of the above, please explain:			
Are you a student?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	If yes, School/University Name:

Personal References (non-family). *At least one must be a professional reference.*

Name: _____ Relationship: _____ Email: _____ Phone#: _____

1.

2.

3.

4.

List any previous volunteer experience:

Organization: _____ Contact Name/Email or Phone: _____ Your Involvement: _____ Dates: _____

List any service or groups that you belong to or participate with:

alley's house has many diverse needs and opportunities for volunteers. Please check your area of interest:

- | | | |
|---|--|---|
| <input type="checkbox"/> Administrative | <input type="checkbox"/> Funds Development Committee | <input type="checkbox"/> Special Events Committee |
| <input type="checkbox"/> Board of Directors | <input type="checkbox"/> Intern | <input type="checkbox"/> Tutoring |
| <input type="checkbox"/> Child Care | <input type="checkbox"/> Marketing | <input type="checkbox"/> Workshop Facilitator |
| <input type="checkbox"/> Finance Committee | <input type="checkbox"/> Mentoring | <input type="checkbox"/> Other (please specify): |

How many hours can you volunteer? _____ (Check one that applies): Weekly Monthly

What times can you volunteer? (Check all that apply) Evenings Weekends Weekdays

Do you carry the legal minimum automobile insurance? Yes No

Have you been trained in first aid and/or CPR? Yes No

Other information you feel may be a valuable contribution to alley's house?

Please read before signing:

- I understand that the information I have provided may be verified and I give permission to alley's house to make inquiry of others concerning my suitability as a volunteer.
- In the course of volunteering, I may be dealing with confidential information and I agree to keep said information in confidence.
- I affirm that I have read the above and that the information I have given is true and complete.

Signed: _____

Date: _____

Please attach a copy of your Driver's License, Liability Insurance Card, the Criminal Background Check Consent Form and the Mentor Profile Form if you're applying for a mentor position. Please scan and email forms to program.director@alleyshouse.org or mail to: 4113 Junius St., Dallas, TX 75246. If you have questions, please call 214.824.8700.