

1005 E. Las Tunas Dr. #525

San Gabriel, CA 91776

Phone: (626) 569-0991

www.familypromisesgv.org

**VOLUNTEER/INTERNSHIP APPLICATION FORM**

**Contact Information**

|  |  |  |  |
| --- | --- | --- | --- |
| **Last Name** | **First** | **Middle** | |
| **Home Address** | **City** | **State** | **Zip Code** |
| **Phone** | **Date of Birth** | **Email** | |
| **Emergency Contact** | **Phone** | **Relationship** | |

**Education and Experiences (recent paid or volunteer)**

|  |  |  |
| --- | --- | --- |
| **Organization Name** | **Position Title** | **Address** |
| **From To** | **Supervisor's Name** | **Phone** |

**Volunteer or Intern Field of Interest(s)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Accounting/Finance** |  | **Consultant Counseling** |  | **Social Media** |  |
| **Administrative Support** |  | **Counseling** |  | **Technical/Grant Writer** |  |
| **Case Manager/Social Worker** |  | **Fund Development** |  | **Volunteer Advisor/Coordinator** |  |
| **Communications/Public Relations** |  | **Project Management** |  | **Other(specify)** |  |
| **Computer Support/IT** |  | **Public Health** |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Language Skill(other than English)** | **Speak** | **Read** | **Write** |

**Availability**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Monday** | **Tuesday** | **Wednesday** | **Thursday** | **Friday** | **Saturday** | **Sunday** |
|  |  |  |  |  |  |  |

|  |
| --- |
| **Have you ever been convicted of a felony or misdemeanor other than minor traffic violations? If yes please explain. Yes ☐ No ☐** |
| **Have you ever worked as FPSGV employee or volunteer? (If yes, give position and dates.) Yes ☐ No ☐** |
| **Why do you wish to volunteer with Family Promise of San Gabriel Valley? (optional)** |

**In an effort to assure your safety and safety of those we serve, Family Promise of San Gabriel Valley requires all employees and volunteers complete a background check prior to employment or registered volunteer service.**

**I certify that all statements I have made on this application are true and correct. I hereby authorize FPSGV to investigate the accuracy of this information. I expressly request references who may have information concerning me, to furnish such information to FPSGV, and agree to hold such persons harmless, and I do hereby release them from any and all liability for damage of any nature whatsoever for furnishing such information.**

**Signature of Applicant**

**Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_**

**Parent or Guardian consent required if applicant is under 18 years of age**

**Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_**

**Thank you for taking the time to complete this application form. This will help us match the most suitable placement for your volunteering. All of your information will remain strictly confidential.**