

Volunteer Application for Paramus Veterans Home

Name: _____

Address: _____

City/State/Zip Code: _____

Telephone Number: Home (____) _____ Cell (____) _____

E-mail: _____

Are you 16 years of age? Yes ___ No ___

Are you 18 years of age? Yes ___ No ___

Are you vaccinated? Yes ___ No ___

Present Occupation/Employment: _____

Previous Work Experience: _____

Education: _____

Special Skills, Interests, Experience and Hobbies:

Reason for Volunteering: _____

Days and times available: _____

Would you consider volunteering for special events: Yes ___ No ___ Trips? Yes ___ No ___

Please describe any physical limitations that would preclude you from performing certain volunteer activities:

Emergency Contact:

Name _____ Relationship _____

Address/Phone Number: _____

Please provide three personal references with full mailing or email addresses. Please note- References may NOT be family members.

Name/ADDRESS/EMAIL	Name/ADDRESS/EMAIL	Name/ADDRESS/EMAIL

Have you ever been convicted of a felony or misdemeanor? Yes ___ No ___ If yes, explain.

I declare that all the statements made on this form are accurate and complete to the best of my knowledge.

Signature: _____ Date: _____