



Volunteer Service Application

Thank you for offering your services and time to the Valley Mission!
Please complete each field of information below. A background check is performed on each Volunteer, 18 years of age and older. Any Volunteer under the age of 18 must be accompanied by an adult.

No photography of Valley Mission is allowed.

First Name: _____ Middle Initial: _____ Last Name: _____

Today's Date: _____ Date of Birth: _____

Current Address: _____

Phone: _____ Email: _____

Emergency contact: Name _____ Phone _____

Can you work independently? Yes _____ No _____

Days available: Mon ___ Tues ___ Wed ___ Thurs ___ Fri ___ Sat ___

Times available: Morning ___ Afternoon ___ Evening ___

Do you have an assignment preference? Yes ___ No ___

Thrift Store ___ Kitchen ___ Building & Grounds ___ Other ___

Special skills you have or equipment you have used: _____

Have you ever been convicted of a felony? Yes ___ No ___

If yes, please explain: _____

I give Valley Mission, Inc. the right to check my background and release from all liability or responsibility all persons or companies supplying information. If applicable, I give Valley Mission, Inc. permission to contact my Probation Officer.

CONFIDENTIALITY AGREEMENT: I promise I will not divulge any information that I may hear or see concerning any client, any member of staff, or any volunteer of the Valley Mission during my work at Valley Mission, Inc.

Signature _____ Date _____