

Volunteer Application

3339 Tamiami Trail East, Suite 211
Naples, FL 34112
(203) 252-5713

Volunteer Information	
Full Name	
Driver's License #	
Street Address	
City, State, Zip	
Home Phone	
Cell Phone	
Email Address	
Birth Date (mm/dd/yyyy)	Validated <input type="checkbox"/> Yes <input type="checkbox"/> No By:
Are you a year-round resident? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Person to Notify in Case of Emergency	
Name	
Home Phone	
Relationship to you	

Our Policy

Equal Opportunity will be a fundamental principle of this organization, where volunteering is based upon personal capabilities and qualifications without discrimination because of race, color, religion, gender, age, national origin, disability, or any other protected characteristic as established by law.

Federal Diversity Reporting Requirements. <i>(The following information is for statistical purposes only. Providing this information is <u>voluntary</u>.)</i>	
Race: <input type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> Pacific Islander <input type="checkbox"/> American Indian/Alaskan Native	
Ethnicity: <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Non-Hispanic/Latino	
Gender: <input type="checkbox"/> Female <input type="checkbox"/> Male Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Widowed	
Are you a Veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No Are any of your family members Veterans? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Are you a widowed Veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Other: Please let us know if you require any accommodations under the American with Disabilities act.	

INTEREST CHECKLIST – PLEASE INDICATE ALL THAT APPLY

Work w/Children	Work w/Seniors	Veterans	Clerical	Mailings
Mentoring	Work w/Food	Healthcare	Accounting	Research/Analyst
Tutoring	Deliver Meals	Case Work	Information Desk	Marketing
Literacy	Driving	Computer	Telephone	Construction
Teaching	Companionship/ Visits	Crisis Prevention	Data Entry/ Typing	Disaster/ Emergency Services
Fitness/Bone Builders Instructor – Lead low impact exercises to reverse effects of osteoporosis.				

Newsletter and Photo Release

Do you authorize AmeriCorps Seniors RSVP of Collier County to use and publish photographs of yourself volunteering for promotional purposes?

Yes No Initials:

Criminal Background Check

You may be subject to a background check by RSVP or by your Volunteer Station prior to placement. AmeriCorps Seniors recommends background checks for any volunteer working with potentially vulnerable populations. Please inform the RSVP Project Director of any circumstances that may come up during this check.

Applicant

Signature:

Date:

AmeriCorps Seniors RSVP of Collier County staff:

Reviewed by:

Date: