



# Volunteer Application

Note: This form is for volunteers age 18 and over. If you are under age 18, please use the High School form.  
Thanks!

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone: \_\_\_\_\_ Email Address \_\_\_\_\_

YES! Please add me to Patchwork's email mailing list with bi-weekly newsletters and other updated information about all of Patchwork's programs.

Emergency Contact Name \_\_\_\_\_ Relationship: \_\_\_\_\_

Emergency contact's phone number \_\_\_\_\_

Any medical information we should know in an emergency \_\_\_\_\_

Present Employer \_\_\_\_\_ Type of Employment \_\_\_\_\_

Community Involvement (example: your church, membership in community organizations, businesses from which you are retired): \_\_\_\_\_  
(Note: Occasionally, businesses, churches, or community organizations who fund our programming ask if any of their members volunteer at Patchwork. This information helps us answer this question. It will not be used for discriminatory purposes.)

How did you hear about Patchwork's programs? \_\_\_\_\_

Why are you interested in volunteering at Patchwork? \_\_\_\_\_

List other volunteer experience: (If you would like to volunteer in our children's program, please describe your experience working with children) \_\_\_\_\_

Which Patchwork program(s) would you like to volunteer in?

- Food Pantry
- Arts & Smarts Children's Program (including tutoring)
- Other \_\_\_\_\_

What day(s) and time(s) are you available to volunteer? \_\_\_\_\_

If you would like to volunteer in the Arts & Smarts Program, please answer the following: What activities or needs best match your interests/abilities?

- |   |   |
|---|---|
| <input type="checkbox"/> I have already set a time/program to volunteer | <input type="checkbox"/> Reading with children    |
| <input type="checkbox"/> Snacks   | <input type="checkbox"/> Music                    |
| <input type="checkbox"/> Art  | <input type="checkbox"/> Bike Club                |
| <input type="checkbox"/> Tutoring                                       | <input type="checkbox"/> Art & Co./Business class |
| <input type="checkbox"/> Creative writing                               | <input type="checkbox"/> Dance                    |
| <input type="checkbox"/> Chaperone on occasional field trips            | <input type="checkbox"/> Other _____              |

Please provide three personal references.

- References should be adults who are NOT family members. Examples include: co-workers, employers, teachers, pastors.
- If you will be working at Patchwork Central as an intern, we ask that you provide professional references, if possible. These are people who can speak to your professionalism such as supervisors or co-workers.
- **If you have volunteered in Patchwork Central's Arts & Smarts Program within the last 2 years and remain in good standing, you do not need to provide references. Your status will be confirmed with program staff. We reserve the right to ask for additional references.**

I have volunteered in the Arts & Smarts Program within the last 2 years, and to my knowledge I remain in good standing.

1. Name \_\_\_\_\_  
Phone \_\_\_\_\_ Relationship \_\_\_\_\_
2. Name \_\_\_\_\_  
Phone \_\_\_\_\_ Relationship \_\_\_\_\_
3. Name \_\_\_\_\_  
Phone \_\_\_\_\_ Relationship \_\_\_\_\_

**Background check information:** Patchwork's policy is to complete a criminal history background check every two years on all volunteers working in the Arts & Smarts Program. Criminal background checks are completed through Veriscreen. Your Veriscreen application is kept confidential and secured. Background checks are done only by trained Patchwork staff members for the purpose of verifying information on this application. Results of the background check are kept confidential.

**Releases and Waivers:**

Patchwork Central, Inc. (PWC) will take every precaution to provide for the protection and safety of all participants. In the event of an emergency or accident, PWC will, to the best of our ability, provide first aid and notify emergency contact via the phone numbers provided on this form. I waive and release all claims for liability that I may have against Patchwork Central, Inc., including all its directors, officers, employees, agents and instructors, for any injury, loss, or damage that may arise out of or in connection with PWC programs. I acknowledge that this waiver and release is given in return for, and in consideration of, PWC allowing me to participate in their programs.

I release any photographs or video tapes made of my activities at Patchwork Central, Inc. to be used by Patchwork Central, Inc. for any purpose.

I understand that Patchwork Central will verify the information I have provided on this application and that a Criminal History background check will be part of this verification.

**Signature:**

**I have fully completed this application and I attest that the information I have provided here is truthful and accurate. I have read, understand, and agree to the waivers and releases above.**

**Signature** \_\_\_\_\_ **date** \_\_\_\_\_