

**SAVED HANDS FOUNDATION**

**Volunteer Application**

|  |  |  |
| --- | --- | --- |
| **APPLICANT INFORMATION**  |  |  |
| Last Name  | First  |   | M.I.  | Date  |  |
| Street Address  |  | Apartment/Unit #  |  |
| City  | State  |   | ZIP  |  |
| Phone  | E-mail Address  |   |  |
| Date Available  | Social Security No.  |   |  |
| Volunteer Position  |  |  |
| Are you a citizen of the United States?  YES NO | If no, are you authorized to YES work in the U.S.?  | NO   |
|  Have you ever worked/volunteered for this company?  YES NO   | If so, when?  |  |
|  | Please be honest, your answer will not affect your acceptance within the Foundation. |  |
| Have you ever been convicted of a felony? . YES NO  |  | If yes, explain  |

|  |  |  |
| --- | --- | --- |
| **EDUCATION**  |  |  |
| High School  | Address  |   |
| From  | To  | Did you graduate?  | YES  | NO  | Degree  |
|  |
| College/Vocational  |  |  | Address  |   |
| From  | To  | Did you graduate?  | YES  | NO Degree/Certificate   |
|  |  |  |  |  |
| Other  |  |  | Address  |   |
| From  | To  | Did you graduate?  | YES  | NO  | Degree/Certificate  |

|  |  |  |
| --- | --- | --- |
| **REFERENCES**  |  |  |
| Please list three professional references.  |  |  |
| Full Name  | Relationship  |   |
| Company  | Phone  | ( )  |
| Address  |  |  |
|  |  |  |
| Full Name  | Relationship  |   |
| Company  | Phone  | ( )  |
| Address  |  |  |
|  |  |  |
| Full Name  | Relationship  |   |
| Company  | Phone  | ( )  |
| Address  |  |  |



|  |  |  |
| --- | --- | --- |
| **PREVIOUS EMPLOYMENT**  |  |  |
| Company  | Phone ( )  |  |
| Address  | Supervisor  |  |
| Job Title Starting  Salary  | $ Ending Salary  | $  |
| Duties: |  |  |
| From To Reason for Leaving  |  |  |
| May we contact your previous supervisor? YES |  NO  |  |

|  |  |  |
| --- | --- | --- |
| Company  | Phone ( )  |  |
| Address  | Supervisor  |  |
| Job Title Starting  Salary  | $ Ending Salary  | $  |
| Duties:  |  |  |
| From To Reason for Leaving  |  |  |
| May we contact your previous supervisor?  YES | NO  |  |
|  |  |  |
| Company  | Phone ( )  |  |
| Address  | Supervisor  |  |
| Job Title  | Starting Salary  | $  | Ending Salary  | $  |
| Duties:  |  |  |
| From To Reason for Leaving  |  |  |
| May we contact your previous supervisor?  YES | NO  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **MILITARY SERVICE**  |  |  |  |
| Branch  | From  |   | To  |
| Rank at Discharge  | Type of Discharge  |  |   |
| If other than honorable, explain  |  |  |  |
| **DISCLAIMER AND SIGNATURE**  |
| I certify that my answers are true and complete to the best of my knowledge. I understand that false or misleading information in my application may result in my release.  |
| Signature Date  |