



# Volunteer Application

## Contact Information

Name	
Street Address	
City, State ZIP Code	
Home Phone	
Work Phone	
E-Mail Address	

## Availability

During which hours are you available for volunteer assignments?

- Weekday mornings       Weekend mornings  
 Weekday afternoons       Weekend afternoons  
 Weekday evenings       Weekend evenings

## Interests

Tell us in which areas you are interested in volunteering

- Working with children  
 Working with adults  
 Events \_\_\_\_\_  
 Teaching \_\_\_\_\_  
 Fundraising  
 Data Entry  
 Filing  
 PR  
 Volunteer coordination  
 **Other** \_\_\_\_\_

## Special Skills or Qualifications

Summarize special skills and qualifications you have acquired from employment, previous volunteer work, or through other activities, including hobbies or sports.

## Previous Volunteer Experience

Summarize your previous volunteer experience.

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## Person to Notify in Case of Emergency

Name	
Street Address	
City, State ZIP Code	
Home Phone	
Work Phone	
E-Mail Address	

## Agreement and Signature

By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my immediate dismissal.

Name (printed)	
Signature	
Date	

## Our Policy

It is the policy of this organization to provide equal opportunities without regard to race, color, religion, national origin, gender, sexual preference, age, or disability.

Thank you for completing this application form and for your interest in volunteering with us.

**Please send completed application, including Background Screening Form, to:  
Sally Lang, JCC, 2 Millstone Campus Drive, St. Louis, MO 63146 or  
scan completed forms and e-mail to slang@jccstl.org.**

JEWISH COMMUNITY CENTER  
CONSENT/RELEASE FORM  
BACKGROUND SCREENING FOR AGENCY EMPLOYEES/VOLUNTEERS

I authorize and give consent to Jewish Community Center, St. Louis, Missouri, to obtain information regarding myself in accordance with the Fair Credit Reporting Act and applicable state and federal laws. This includes the following:

- Criminal background records/information
- Sex Offender Registry check
- Personal and employment references
- Addresses
- Motor Vehicle Report

I the undersigned authorize the information to be obtained either in writing or via telephone in connection with my employment/volunteer association with Jewish Community Center. Any person, firm, or organization providing information in accordance with this authorization is released from any and all claims of liability for compliance.

If a blemish appears on a background check it may be reviewed by the President/CEO to determine if my participation as an employee/volunteer at Jewish Community Center is appropriate.

Printed Full Name \_\_\_\_\_ Date \_\_\_\_\_

Signature (in ink) \_\_\_\_\_ Please circle one: Employee or Volunteer

If under 18, Signature of Parent or Guardian \_\_\_\_\_

Date of Birth \_\_\_\_\_ Phone Number \_\_\_\_\_

Social Security Number \_\_\_\_\_

Current Home Street Address \_\_\_\_\_

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

County of Residence \_\_\_\_\_

Driver's License (state and number) \_\_\_\_\_

JCC Supervisor \_\_\_\_\_