



Volunteer Application

Date: _____ DOB: _____

Name: _____

Address: _____ City _____ State _____ Zip _____

Home Phone: _____ Cell Phone: _____

E-mail: _____

Occupation/Employer/School: _____

Address: _____

Have you ever been convicted of a felony/crime/? _____ Yes _____ No

If the answer is yes, please explain: _____

What training or formal education have you had that might enhance your volunteer experience with us?

Please describe any paid/unpaid work experience you may have had that might relate to your interest in volunteering here: _____

Are you currently doing any other volunteer work? _____ Yes _____ No

If the answer is yes, where?: _____

How did you hear about volunteer opportunities at Anchor House?

Friend _____ +Anchor House Website _____ Other Website: _____

Other: _____

Please explain why you are interested in volunteering at Anchor House

Please list any community organizations or activities to which you currently belong and in which you participate:

Which program are you most interested in working with?:

Anchor House Shelter(ages12-17)

Anchorage (ages 18-21)

Please list any dates and times you are available to volunteer:

Please also provide 3 personal or professional references (no family members). The reference form can be found on-line at www.anchorhousenj.org under the 'Get Involved' Tab, or you may request it from the Volunteer Coordinator at (609) 396-8329 ext. 109

Applicant's Statement:

I hereby affirm that the information provided on this application is true and complete to the best of my knowledge and agree to have nay of the statements verified by the agency and/or its representatives. I understand that providing any false or misleading information or any omissions may disqualify me from further consideration as an intern and may result in my immediate termination, even if discovered at a later date.

I authorize representatives of Anchor House, Inc. to conduct a thorough investigation of my activities, and authorize all references provided in this application, as well as all other individuals, whom the agency and/or its representatives may contact to provide all information they have about me. Furthermore, I agree to cooperate in such investigation and release all liability or responsibility of the agency, all persons and entities acting on its behalf, and all persons and entities requesting or supplying such information.

Signature of Applicant

Date

**Please return completed application & 3 references
to: Anchor House, Inc.
482 Centre Street, Trenton, NJ 08611
Attn: Volunteer Coordinator**