



# ORATORY

## DON BOSCO

### Volunteer Application Form

Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

Home phone: \_\_\_\_\_ Cell phone: \_\_\_\_\_

Please provide the names of two references that have known you for 10 years.

Reference 1:

Name: \_\_\_\_\_ Phone number: \_\_\_\_\_

Reference 2:

Name: \_\_\_\_\_ Phone number: \_\_\_\_\_

.....  
**When are you available to volunteer?** Please check all that apply.

Once a month       Once a week       Mon. 3:30-5:30 p.m.   
Tues. 3:30-5:30 p.m.       Wed. 3:30-5:30 p.m.       Thurs. 3:30-5:30 p.m.   
Other: \_\_\_\_\_

**What can you help with?** Please check all that apply.

Tutoring       Preparing/Serving snacks       Monitoring       Cleaning   
Leading an arts & craft activity       Other: \_\_\_\_\_

**Do you have a special talent to share and teach?** Please check and elaborate.

Music \_\_\_\_\_  
 Arts & Crafts \_\_\_\_\_  
 Trade \_\_\_\_\_  
 Other: \_\_\_\_\_

**T-shirt size:** Adult Small     Medium     Large     XLarge     XXL

.....for office use only.....

Initial Safe Environment training \_\_\_\_\_ eAppDB: \_\_\_\_\_ Virtus: \_\_\_\_\_

Continuous training: Date \_\_\_\_\_ Date \_\_\_\_\_ Date \_\_\_\_\_ Date \_\_\_\_\_ Date \_\_\_\_\_ Date \_\_\_\_\_

Reference 1: \_\_\_\_\_ (date)     Reference 2: \_\_\_\_\_ (date)

Volunteer orientation attended     Social Media policy     Code of conduct

Add'l Notes:

\_\_\_\_\_

CJC-PBS approved  \_\_\_\_\_