



FarmOn! Foundation Volunteer Application

Thank you for your interest in the FarmOn! Foundation. Volunteers play a vital role in the success of our mission. All volunteer applications are reviewed with consideration of current volunteer opportunities. The completed form you provide will be held securely and confidentially. Only authorized staff will have access to your information. All applicants must answer the following questions. Failure to answer honestly will disqualify the applicant from service as a volunteer with our organization.

GENERAL

Name _____ Date: _____

Phone Number _____

Address _____

City/ State/ Zip _____

Age _____

Have you ever been convicted as an adult for a criminal violation?

Yes

No

If so, please explain?

WORK AND VOLUNTEER EXPERIENCE

Present Employer _____ Position _____

How long _____ Supervisor _____ Phone _____

PREVIOUS VOLUNTEER EXPERIENCE

<u>LOCATION</u>	<u>DATES</u>	<u>WORK PERFORMED</u>	<u>CONTACT PERSON</u>

Have you volunteered with the FarmOn! Foundation before?

- Yes
- No

If so, for which event/occasion? _____

VOLUNTEER POSITION INFORMATION

What position are you applying for? _____

What skills can you contribute to the organization? _____

What experience do you have in this area? _____

What days will you be available?

- Monday
- Tuesday
- Wednesday
- Thursday
- Friday
- Saturday
- Sunday

What time of the day are you available? _____

EMERGENCY CONTACT INFORMATION

Name _____

Phone _____

Work Phone _____

Relation to Contact _____

SIGNATURE

By signing below you agree that all information that you have provided in this application is true to the best of your knowledge.

Signature _____ **Date:** _____