

Happiness Bag, Incorporated
Adult Volunteer Application

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Number: _____ Cell Phone: _____

Position: _____ Years Employed: _____

What special skills and/or qualifications do you have that would be beneficial to our Agency?

What day(s) and time(s) are you interested in volunteering?

Which area(s) are you interested in volunteering; Adult Day Service Summer Day Camp Special Olympics

EDUCATION

Name of School	Major	Years Attended	Degree/Diploma

The questions in the following area are to be answered on a voluntary basis

Male _____ Female _____ Marital Status: Single _____ Married _____ Divorced _____

Do you have a valid Driver's License? YES _____ NO _____ State Issued: _____ Expiration Date: _____

Have you ever been convicted of a crime within the past ten years: _____ if yes, please list the convictions. You are not excluded from consideration for a conviction. However, the nature and recency of the conviction(s) will be considered.

Signature of Volunteer

Date