



St Anthony of Padua Conference
The Society of St Vincent de Paul
405 E 2nd St, Casa Grande, AZ 85122
Phone 520-836-2009 Fax 520-876-0072
SVDPCasaGrande@gmail.com

VOLUNTEER APPLICATION FORM

Date: _____ Driver's License # _____ State _____

First Name _____ Last name _____

Address _____ City _____ Zip _____

Home Phone _____ Cell Phone _____

Email Address _____

Education Summary _____

Job Skills _____

Three References:

1st: Name _____ Address _____ Phone _____

2nd: Name _____ Address _____ Phone _____

3rd: Name _____ Address _____ Phone _____

Have you ever been in trouble with the law? Yes ___ No ___

If yes, explain: _____

Which of the following areas would you like to volunteer in?

- ___ Benevolent Office (Conduct interviews to determine need) 8-1 Mon-Fri
- ___ Thrift Store (Retail sales, stocking, pricing, organizing) 9-1 Mon-Fri, 9-3 Sat
- ___ Warehouse (Processing donated items) 9-1 Mon-Fri, 9-3 Sat

Which days would you like to volunteer?

Mornings Monday ___ Tuesday ___ Wednesday ___ Thursday ___ Friday ___ Sat ___

Afternoons Monday ___ Tuesday ___ Wednesday ___ Thursday ___ Friday ___ Sat ___

Do you have any physical problems that would limit your help? Yes ___ No ___

If yes, explain _____

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Interviewer's comments:

IMPORTANT - THIS SECTION MUST BE COMPLETED

1. Has a civil or a criminal complaint every been filed against you that alleged sexual misconduct or child abuse by you or your participation in or facilitation of such activities (including internal complaints or allegations reported to management or supervisors at places of employment)? Yes No If yes, explain. Provide the date, nature and place of the incident leading to the complaint; where the complaint was filed; disposition of the complaint; and identify, by name and title, the person (s) who investigated the complaint.

2. Do you presently serve, or have served, as a volunteer for any organization entity or group in which you had substantial contact with children or vulnerable populations (such as elderly mentally or emotionally disabled, etc.)? Yes No If yes, provide the name and phone number of the organization period of volunteer service, supervisor's name, and briefly describe your activities and/or duties.

3. Have you ever chosen not to renew or continue any employment or volunteer service, had your employment or volunteer service terminated, or been subject to and disciplinary action for reasons relating to allegations or sexual misconduct or child abuse by you? Yes No If yes, explain. Provide date, nature and place of the occurrence (s) or allegations (s) and the disposition of the matter. Provide name address, phone of employer/supervisor at the time.

4. Have you ever been convicted of a crime (felony or misdemeanor) other than a minor traffic violation? Yes No If yes, explain. Provide the crime for which you were convicted and the date and place of this conviction.

IMPORTANT: For your application to be considered, you must sign below to indicate that you have read and understood this statement:

The information I have provided in this application is true, correct, and complete. If accepted for a volunteer position and I misstate or omit facts on this application, it may result in the termination of my volunteer service. I grant permission to check on my background and reference and I release the Casa Grande Conference from any and all resultant liability. If accepted for a volunteer position I will abide by the code of conduct of the Casa Grande Conference and the policies and procedure of the organization. I understand that acceptance of a volunteer position does not create a contractual obligation upon the Casa Grande Conference to continue my volunteer service activity in the future. Participation in a volunteer activity does constitute a preference for employment. Upon termination of my volunteer service, I authorize the release of reference information by the Casa Grande Conference.

I further understand that while not all positions with the Casa Grande Conference involve significant contact with children or vulnerable adults, that all persons seeking volunteer position with the Casa Grande Conference must be fingerprinted and pass a background check before having contact with children and vulnerable adults.

I will be required to furnish proof of identity. I understand that if accepted for volunteer service my service can be terminated at any time, with or without reason.

Signature: _____

Date: ____/____/____

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The necessity of fingerprinting and passing a background check as a condition of seeking volunteer service with the Casa Grande Conference has been explained to this applicant. This workplace understands that an offer of volunteer position is contingent upon fingerprinting of the applicant. This workplace understands that an offer of volunteer position is contingent upon the applicant's passing of the background check of references.

Signature of Conference Manager: _____

Date: ____/____/____

EMERGENCY CONTACT INFORMATION

NAME (PRINT) _____

ADDRESS _____

CITY, ST, ZIP _____

PHONE _____

EMAIL ADDRESS _____

.....

EMERGENCY CONTACT NAME _____

EMERGENCY PHONE _____

RELATIONSHIP _____

.....

SIGNATGURE _____ DATE ____/____/____