



**VOLUNTEER SERVICES APPLICATION**

**Please fill out completely.**

First Name	Middle Initial	Last Name
Street Address	City	State
Zip code		
Home Phone ( ) _____	E-mail Address _____	
Cell Phone ( ) _____	School District _____	
<u>Employer</u>		
Business _____		
Contact Person _____		
Address _____		
City _____	State _____	Zip _____
Phone ( ) _____	<u>Emergency Contact</u>	
Name _____		
Address _____		
City _____	State _____	Zip _____
Home or Cell Phone ( ) _____	Work Phone ( ) _____	

**References**

**Because of the sensitive nature of our work, we request three personal or professional references.**

Name _____	Home/ Cell Phone ( ) _____
Address _____	
Name _____	Home/ Cell Phone ( ) _____
Address _____	
Name _____	Home/ Cell Phone ( ) _____
Address _____	

Have you ever been convicted of anything other than a minor traffic violation?     No     Yes  
 If yes, please explain.

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Do you currently have any felony charges pending against you?     No     Yes  
 If yes, please explain.

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Is it necessary for you to limit your activity in any way?     No     Yes  
 If yes, please explain. What can we do to accommodate you?

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Are you volunteering for college or university credit?     No     Yes  
 Which college or university? \_\_\_\_\_ How many hours? \_\_\_\_\_

Are you receiving or have you received services from us?     No     Yes    Date of service \_\_\_\_\_  
 If yes, please explain. Month    Year

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## VOLUNTEER SERVICES APPLICATION

### Volunteer Experience

At what other agencies have you volunteered? What is the agency's primary function?

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Briefly explain what type of work you did.

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### Volunteer Areas of Interest (Please select all that apply.)

Administrative: Assist with phones, stuff envelopes, file, work on mailings, and help with other administrative tasks including computer needs.

Child Care: Watching children during support groups and being on call for daytime childcare backup.

Donations: Assist with organizing the donation room with other volunteers.

Maintenance: Various maintenance needs inside and outside the shelter, such as painting, gardening, and maintaining backyard landscaping.

Public Education/Community Outreach: Assist with community and agency events, aid educators and presenters with developing presentations, distribute materials in the community, and represent Underground Railroad at health fairs and other community events.

Documents: Help organize and archive URR newsletters, newspaper clippings, event materials, etc.

Special Events/Fundraisers: Work on special events and fundraisers, such as Chocolate Lovers, Domestic Violence Awareness Month, and Sexual Assault Awareness Month.

Advocacy: Help staff with various tasks to improve services to program participants.

Court Support: Assist clients with paperwork and information regarding community resources, personal protection orders, victim's rights, and support clients in court appearances.

SafePlace Visitation Center: Assist staff with monitoring supervised visitation and exchange of children between custodial and non-custodial parents.

▲ What are your special skills or talents? \_\_\_\_\_

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### Vehicle Use

Do you own a car?  No  Yes

If yes, would you be able to use the car for volunteer purposes?  No  Yes

**NOTICE:** ALL VOLUNTEERS OR INTERNS PLANNING TO USE THE AGENCY VAN MUST SUBMIT A COPY OF THEIR DRIVER'S LICENSE AND PROOF OF INSURANCE.

For URR use: Copy of license _____ Copy of Proof of Insurance _____
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**VOLUNTEER SERVICES APPLICATION**

**Days and Hours Available**

Sunday From \_\_\_\_\_ to \_\_\_\_\_  
Monday From \_\_\_\_\_ to \_\_\_\_\_  
Tuesday From \_\_\_\_\_ to \_\_\_\_\_  
Wednesday From \_\_\_\_\_ to \_\_\_\_\_  
Thursday From \_\_\_\_\_ to \_\_\_\_\_  
Friday From \_\_\_\_\_ to \_\_\_\_\_  
Saturday From \_\_\_\_\_ to \_\_\_\_\_

How many hours would you like to volunteer?

Per day? \_\_\_\_\_

Per week? \_\_\_\_\_

Per month? \_\_\_\_\_

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**I affirm that the information provided on this application is true and complete. I hereby give my permission and authorize representatives of Underground Railroad, Inc. to investigate any or all of the statements I have made in this application. As a part of this application, I consent to allowing Underground Railroad, Inc. to conduct a criminal background investigation and to complete a reference check.**

**Signature** \_\_\_\_\_ **Date** \_\_\_\_/\_\_\_\_/\_\_\_\_

**Please mail this application to:**

**Underground Railroad, Inc.  
Attn: Volunteer Coordinator  
P.O. Box 2451  
Saginaw, MI 48605**

Phone: 755-0413 x. 202  
Fax: (989) 755-3006  
E-mail: [urrvolunteering@yahoo.com](mailto:urrvolunteering@yahoo.com)