

PARTNERS FOR AFFORDABLE HOUSING VOLUNTEER APPLICATION

Full Name: _____ Date: _____

Gender (Circle one): Male Female Are you 16 years of age or older? Yes _____ No _____

Address: _____

City: _____ State: _____

Phone: Home _____ Cell _____ Birthday _____

Email Address: _____

Volunteer Affiliation (Circle One): Community Member Student Church Member

<p>Are you are a student volunteering for a service-learning class or a religious education class? No _____ Yes _____ If yes: Name of School, Church or College: _____</p> <p>Class: _____ Instructor: _____</p> <p>Required Hours: _____ Date of Completion: _____</p> <p>Will you continue to volunteer after your hours are completed? Yes _____ No _____</p>
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I am willing to give _____ hours/week or _____ every two weeks or _____ hours/month.

Please mark the times for each day that you **ARE** available with an "x".

Times Available	Monday	Tuesday	Wednesday	Thursday	Friday
Morning					
Afternoon					
Evening					

**This is just to give us a general idea of your availability. We will get more specific times at orientation.*

Are you available Weekends? Yes _____ No _____

Emergency Contact Information: Please list someone who can be contacted in case of an emergency:

Name _____ Relationship to you _____

Work # _____ Home # _____

As a volunteer applicant, I understand that Partners for Affordable Housing, Inc. conducts background checks and I authorize them to do so.

Applicant Signature **Date** Please print any former names

OFFICE USE ONLY:
 Approved? _____ Accept Back? _____

Comments: _____