



VOLUNTEER APPLICATION

The St. Vincent de Paul USA Council provides equal opportunity to all volunteers without regarding to race, color, religion, sex, national origin, age, marital status, handicap or disability, sexual orientation, or any other factors prohibited by law, except as such factors may be lawfully used to determine job related requirements.

Contact Info

Full Legal Name

Today's Date

Street Address

City

State

Zip

Home Phone Number

Work Phone Number

Cell Phone Number

Email Address

Date of Birth

Volunteer Info

Type of Volunteer: Individual Group (Associated Organization _____)

Sex: Male Female

Veteran: Yes No

Are these hours for school? Yes No

- If "Yes", total hours you need to complete _____
- Date when hours need to be completed _____

Have you ever been convicted of a felony or crime? Yes No

- If yes, what was the charge?



Court Order

Is this a court order for community service? Yes No

If "Yes" to court order for community service, please provide:

- Case Number

- Violation

- # of Hours You Need to Complete

- Date When Hours Need to Be Completed By

- Case Worker Name

- Case Worker Phone #

Note: We do not accept offenses that are violent or sexual in nature such as domestic violence, assaults, sexual misconduct with a minor, etc. We do not accept individuals who are on parole.

Emergency Contact

Name of Emergency Contact

Relationship to you

Phone number