

# Middlesex County Center for Empowerment

## Volunteer Application

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone: (Primary) \_\_\_\_\_ (Secondary) \_\_\_\_\_

E-mail Address: \_\_\_\_\_ Length of residence in Middlesex County: \_\_\_\_\_

Do you prefer receiving **training updates** via:  Email OR  Post mail

Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

Education: \_\_\_\_\_

Languages spoken: \_\_\_\_\_

Please list community affiliations, volunteer activity, and/or relevant experience (if prior volunteer experience, please include name, address, and phone of supervisor): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Briefly, why are you interested in volunteering for the Center? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please list any times you would be unable to be on call: \_\_\_\_\_

Please provide a name and telephone number for a reference (non-related): \_\_\_\_\_

Have you ever been accused, tried, or convicted of a violent crime? \_\_\_\_\_

Would you be willing to submit to a background check?  Yes  No

How did you hear about this opportunity?

- Internet/Online (please indicate website): \_\_\_\_\_  Family Member/Friend  
 Newspaper (please indicate which): \_\_\_\_\_  Other: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_