

**CHILDREN'S RESPITE CARE CENTER
Volunteer Application Form**

Date ____/____/____

Name _____

Address _____

City _____ State _____ Zip Code _____

Phone _____

Email Address _____

School Attending _____ Grade _____

Types of activities you are interested in:

Hobbies:

What experience have you had as a volunteer in community service?

What skills or special interests do you have that are not mentioned that you feel could be particularly helpful as a volunteer at CRCC?

As a volunteer, how much time would you be interested in giving?
(Please specify morning, afternoon, weekends and approximate hours per day or week)

Why do you wish to do volunteer service with CRCC?

Who referred you to CRCC?

Volunteer's Signature: _____

EMERGENCY NOTIFICATION FORM

Date: _____

Volunteer Name: _____

In Case of Emergency notify: _____

Relationship: _____

Home Phone Number: _____

Work Phone Number: _____

Cell Phone Number: _____

**Children's Respite Care Center
Volunteer Reference Request**

Section 1-Volunteer Applicant completes

Date: _____

Interested in Volunteering at: SW NW

Volunteers Name: _____

Reference Name: _____ Relation to Applicant: _____

Reference Phone #: _____

Reference Address: _____

I hereby release from all liability the company or person completing this form, and authorize them to release all information pertaining to this volunteer reference request. I also release CRCC from all liability for any damages from the disclosure of this information.

Volunteer Signature: _____

Date: _____

Section 2 – Volunteer Reference Completes

The individual named above is interested in volunteering for Children's Respite Care Center (CRCC) and has given you as a reference. As we place great importance on the thorough screening of those who work directly with our special children, we would appreciate a prompt and thoughtful response.

Thank you in advance.

Signature of CRCC Representative: _____

Reference Completed: Verbal Mail

1. Please confirm how long you have known the applicant. From _____ To _____
Date Date

2. How are you acquainted with the potential volunteer?

3. Please comment on the volunteer's attributes using the following scale:

4 = Excellent 3 = Good 2 = Fair 1 = Poor N/A – Not Applicable

____ Patience: ____ Presentation of self:

____ Cooperation with other adults: ____ Ability to work with children:

____ Works independently when given a task: ____ Reliability and Attendance:

4. Please indicate special considerations necessary when giving assignments to this individual:

5. Do you know of any reason this person should not volunteer in a daycare center with children?

6. Please indicate specialty areas in which the volunteer has had experience:

7. Additional Comments: _____

(Attach additional sheets if necessary)

Reference Signature

Date