



VOLUNTEER APPLICATION

You can also find our application at Uticamission.org/get-involved/

Individual

Name: _____

Address: _____ Phone: _____

City/State/ZIP: _____ E-Mail _____

Emergency Contact: _____ Phone: _____

Please circle yes or no to answer the questions below:

1. Why would you like to volunteer?

Court Requested? Yes / No If yes, # of Hours: _____ to be completed by: _____

School Credit? Yes / No If yes, # of Hours: _____ to be completed by: _____

2. Have you ever volunteered at the Rescue Mission before? Yes / No

If yes, when and what activities were you involved in?

3. Have you ever been employed by the Rescue Mission? Yes / No. If yes, when? _____

4. Church affiliation: _____

5. Organization membership: _____

6. Have you ever used any of the Rescue Mission services? Yes / No If yes, please explain:

7. Have you ever been convicted of a felony or misdemeanor that has not been sealed or expunged?

[] yes [] no If yes, please list the specific nature and details of the crime(s), date(s), court location, sentencing information, and disposition of sentence on an additional sheet of paper if necessary.

When are you available? (Circle all available time below)

Sun	Mon	Tues	Wed	Thurs	Fri	Sat
Morn	Morn	Morn	Morn	Morn	Morn	Morn
Aft	Aft	Aft	Aft	Aft	Aft	Aft
Eve	Eve	Eve	Eve	Eve	Eve	Eve

List hours available: _____

Area(s) of Interest (Check all that apply):

Addiction Stabilization Center:
(Background Check required)

- Clerical
- AA / NA Meeting Facilitator

Administrative/Clerical:

- Answering phones
- Data Entry
- General Clerical
- Reception (Greet Guests)

Community Services:

- Clothing Closet/ sorting
- Food pantry
- Representative-Payee Dept

Development:

- Coin Canister Program (license & vehicle required)

Finance:

- Clerical/Data Entry

Enriched Living Center:

(Background Check required)

- Clerical
- Hymn Sing

Learning Center:

- Tutor / Mentor

Facilities:

- General lawn care / landscaping
- Weeding, lawn mowing
- Painting / Carpentry
- General cleaning

Food Services:

- Serving Meals (lunch/dinner)
- Holiday Meals:
 - Easter
 - Thanksgiving
 - Christmas

Special Projects:

- Events
- Christmas Gift Wrapping

Spiritual:

- Chapel Services
- Entertainment / Music / Testimony

Miscellaneous:

- Window cleaning
- Sweep lots, sidewalks
- Pick Up / Delivery (vehicle required)

West Street:

- General cleaning - outdoors
- Clerical

Other: _____

Please list two references below, other than relatives or Rescue Mission staff:

Name:	Name:
Email:	Email:
Phone:	Phone:
Relationship:	Relationship:

IMPORTANT: Please read carefully and sign below.

The Rescue Mission serves a variety of different people in our community. We strive to protect their privacy as well as their safety *as well as the safety of our volunteers*. Therefore, the Rescue Mission of Utica reserves the right to limit, restrict and/or deny the use of volunteers on its campus based on the following: (1) criminal history, including sexual offenses and arson; (2) drug possession or sales, (3) refusal to submit to background check and/or drug screening, if required.

Signature

Date

Signature of Parent/Guardian: **if under 18 years of age**

FOR OFFICE USE ONLY:

Notes: _____