



# P. U. M. P. S.

## VOLUNTEER APPLICATION

Name \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_ SS# \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone Number \_\_\_\_\_  home  work  cellular phone  other

Alternate Number \_\_\_\_\_  home  work  cellular phone  other

Email address \_\_\_\_\_ Date of Birth \_\_\_\_\_

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

Special training, skills, hobbies, or expertise \_\_\_\_\_

Memberships/community participation \_\_\_\_\_

Do you have previous volunteer experience?  Yes  No

If yes, describe \_\_\_\_\_

Where would you like to work? \_\_\_\_\_ 1<sup>st</sup> preference \_\_\_\_\_ 2<sup>nd</sup> preference

What days/times are you available?  Weekdays  Weekends  mornings  afternoons  evenings

Please provide three personal and/or professional references from individuals who have first-hand knowledge of your abilities.

Name	Relationship	Telephone Number
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*As a volunteer with P.U.M.P.S., I understand my conduct, conversation, and character should always reflect positivity as an example to the young ladies in the program, clients, and other affiliated individuals/organizations. I may work for a specific term, as decided by program administrators, and my volunteer status may be terminated at any time for any reason by P.U.M.P.S. officials. I hereby release P.U.M.P.S. and its affiliates from any liability while in service for the organization for past, current, and future claims and waive any rights to such claims.*

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Applicant's Printed Name \_\_\_\_\_

Signature of P.U.M.P.S. Official \_\_\_\_\_ Date \_\_\_\_\_

*Send Application to: 4518 S. Cottage Grove • Chicago, IL • 60653*