

## **VOLUNTEER APPLICATION**

Return completed application to Welcome Center

Name:First Address:Street Phone: ( )  Date of birth required:	Email:	<u> </u>
All volunteers are subject to a criminal background check.		
	INTERESTS & SKILL	S
Check the volunteer opportunitie	s you are interested in:	
<ul> <li>□ Welcome Center</li> <li>□ Clerical/Office/Data entry</li> <li>□ Children &amp; Youth</li> <li>□ Wellness Center</li> <li>□ Senior Center</li> <li>□ Housekeeping</li> </ul>		☐ One-time events ☐ Family Fun Nights ☐ Annual Dow Run/Walk ☐ Annual Begin to Swim ☐ Camps
☐ Middle School Athletics:		
☐ Maintenance/Handyman:	Skills	
Tell us a little about yourself:		
Physical limitations or medical restrictions:  What days and times you are available to volunteer? (ex: Wednesdays 6-9pm. Saturdays 9-11am, etc.)		

Welcome Center Staff: Mark date received:

## WELLNESS · RECREATION · SOCIAL SERVICES

## **Criminal Record Check:**

I am aware that Greater Midland requires all potential staff and volunteers submit to a Criminal Record Check through the Michigan State Police.

The following information is required to conduct a criminal Record Check:

Last Name: \_\_\_\_\_\_\_ D.O.B: \_\_\_\_\_\_\_

First Name: \_\_\_\_\_\_\_ Middle Initial: \_\_\_\_\_

Other First or Last Names, Middle Initials: \_\_\_\_\_\_

Race: (Please check one) White \_\_\_\_ African American \_\_\_\_ Asian or Pacific Islander \_\_\_\_

Hispanic/Latino \_\_\_ American Indian or Alaskan Native \_\_\_\_

Unknown/Other \_\_\_\_

Sex: Male \_\_\_\_\_ Female \_\_\_\_\_

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

Department requesting: \_\_\_\_\_\_\_

Date need by: \_\_\_\_\_\_