



Kids deserve the best.

Robyn's Nest Volunteer Application

When is the best time/place to contact you? _____

NAME:	DATE OF BIRTH:
_____ (Please print clearly) First Middle Last (Maiden)	_____
Social Security No. _____ - _____ - _____	
ADDRESS:	
Street: _____	Phone: (____) _____
City: _____	State: _____ Zip Code: _____
Cell Phone: (____) _____	E-mail Address: _____ (please print clearly)

EDUCATION:
High School Name: _____ _____ (city, state)
College/Technical School Name: _____ (if applicable) _____ (city, state)
Major: _____ Minor: _____
Other Education: _____

EMPLOYMENT: Can you be called at work? Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
Most recent employer: _____ Dates Employed: _____
Address: _____ Phone: _____
City, State, Zip: _____ Job Title: _____

OTHER ACTIVITIES: (Including volunteer experiences, religious/community affiliations, and clubs/organizations to which you belong.)

VEHICLE INFORMATION:

Do you drive a car? _____

Please list your valid driver's license number: _____ State: _____

Name of Insurance Company: _____

Policy No.: _____ Dates of Coverage: _____

OPTIONAL INFORMATION:

Sex: _____ Race: _____

Physical/Handicap Condition: _____

Have you ever been convicted of a felony? _____ If yes, please explain: _____

AUTHORIZATION AND RELEASE

All information provided by me in support of my volunteer application is true and correct to the best of my knowledge. I understand that misrepresentation or omissions may be cause for subsequent dismissal if I am selected.

I hereby give Children's Service Society of Wisconsin permission to conduct a background search, which may include any or all of the following: criminal records check, driving record check, Child Protection Services record check, and personal reference checks.

Signature: _____

Date: _____