



VOLUNTEER APPLICATION

NAME _____ DATE _____

ADDRESS _____
Street Address City Zip Code

PHONE _____
Cell Work Home

EMAIL ADDRESS _____ DATE OF BIRTH _____

EDUCATION _____ OCCUPATION _____

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How did you learn about the WRCNM? _____

Why would you like to volunteer for the WRCNM? _____

What special qualifications or experiences do you have that would be an asset to this organization?

Do you have any experience or education in regards to the issues of domestic abuse, sexual assault, stalking, human trafficking or violence against women? If so, please describe. _____

Have you ever used any WRCNM services (Safe Home, counseling, group sessions)? Yes No
If yes, please describe. _____

Have you ever been convicted of, or pled no contest to, a felony or misdemeanor crime? Yes No
If yes, please describe. _____

Do you have any felony charges pending at this time? Yes No

If yes, please describe. _____

Have you and/or your family ever been involved in a Protective Services Investigation? Yes No

If yes, please describe. _____

How much time do you have to volunteer? What days and times are best for you?

What type of volunteer work are you most interested in doing?

- Sales Clerk – Gold Mine
- Maintenance/Repair Services
- Other _____

Safe Home volunteer opportunities for Advocate and Children’s Program Assistant are temporarily paused.

Please provide three professional references:

Name	Address/Phone Number	Relationship
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

In case of accident or emergency, notify:

Name	Relationship	Phone Number
_____	_____	_____

I represent that the answers and information given by me in this application are true and complete without qualification. I hereby authorize the Women’s Resource Center of Northern Michigan (WRCNM) to verify the same and to investigate any of my background deemed necessary including, but not limited to, any records/case files that may be present within the WRCNM and its programs. I realize that misrepresentation of facts called for on this application will be cause for rejection of this application.

Signature Date