

VOLUNTEER APPLICATION



Date:

Legal Name (including middle initial):

Phone:

Email Address:

Emergency Contact, Name and Phone Number:

When are you usually available to volunteer? Weekends _____ Evenings _____
Weekdays _____

What special skills or training do you have that you may share with The Farm?

What are your interests and hobbies?

Why do you want to be a part of The Farm at Prophetstown?

AUTHORIZATION OF BACKGROUND CHECK:

I AUTHORIZE ANY PERSON, AGENCY, PARTNERSHIP, OR CORPORATION HAVING ANY INFORMATION CONCERNING MY BACKGROUND, EDUCATIONAL RECORD, OR EMPLOYMENT RECORD TO RELEASE SUCH INFORMATION. A LIMITED CRIMINAL HISTORY CHECK MAY BE RUN ON ALL VOLUNTEER APPLICANTS. THIS INFORMATION IS TO BE UDES FOR POSSIBLE VOLUNTEER SERVICES ON THE FARM AT PROPHETSTOWN.

DATE OF BIRTH _____

SIGNATURE _____

DATE _____

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