



VOLUNTEER APPLICATION

SECTION A -- APPLICANT INFORMATION

Full Name: _____

Mailing Address: _____

Email Address: _____ Birthdate _____

Home Phone: _____ Cell Phone: _____

List any physical limitations that you'd like us to know about:

How did you hear about our agency?

Why are you interested in volunteering for Lake Links?

How would you like to serve? (Mark all that apply)

- Volunteer Driver Administrative/Clerical Office Cleaning/Organizing Special Events
- Co-Facilitating Volunteer Trainings Community Relations/Fundraising
- Other _____

(Please share your creative ideas on how you might like to serve.)

We occasionally have a need for volunteers with specific skills or knowledge. Please answer the following optional questions to assist us with your volunteer placement:

Do you speak a language other than English? Yes No If yes, indicate language and level of fluency:

Are you a Veteran? Yes No

List any special skills and training that are relevant to your area of volunteer interest:

Your availability: Hours per week/month: _____ Preferred Days _____

Criminal History

Have you ever been convicted of a felony, or are any felony charges pending against you? Yes No
If yes, please explain below. (Note: Some volunteer positions may require a background check.)

SECTION B – VOLUNTEER DRIVER REQUIREMENTS

If applying to serve as a Volunteer Driver, please also complete Section B. (If not, please skip to Section C)

Your invaluable assistance is the backbone that makes our Ride Links volunteer driver program work. Your participation assists seniors to age in place with dignity. Volunteer Drivers will be provided with specialized training to help acquire the skills needed to serve comfortably in their positions. In addition to attending our Lake Links Volunteer Training Program additional documents will be required to be assured that you and your vehicle qualify to participate in the program, like a copy of your driver's license, information on the vehicle you plan to use and your past driving history, proof of minimum required insurance, recent registration, background check, etc. We can guide you through the process of gathering the needed information.

I agree to submit the documentation required to participate in the Ride Links Volunteer Driver Program before I can serve as a volunteer driver.

Signature of Applicant: _____ Date: _____

SECTION C – VOLUNTEER DECLARATION

As a volunteer I realize that I am subject to a code of ethics and conduct like that which binds the professional in the field in which I am to volunteer. I, like them, assume certain responsibilities and expect to account for what I do in terms of what is expected of me.

I understand that any information that is disclosed to me while assisting Lake Links, Inc. is confidential. I agree to respect the confidentiality of any client information I may come in contact within the course of my volunteer activities.

I interpret "Volunteer" to mean that I have agreed to work without compensation of any kind.

My signature below certifies that all statements made on this application are true, complete, and correct to the best of my knowledge and belief. I agree to abide by the statements in this Declaration.

Signature of Applicant _____ Date: _____

Please return completed application form to Lake Links, Inc. PO Box 3001, 14420 Lakeshore Dr, Clearlake, CA 95422, fax: 707-701-6089 or email: info@lakelinks.org