



# Volunteer Application

P.O. Box 1382

Johnston, IA 50311

Phone: (515) 991-0872 Fax: (515) 471-9797

Name \_\_\_\_\_  
First Last Middle Initial

Address \_\_\_\_\_  
Street City State Zip

E-mail address \_\_\_\_\_

Phone Numbers ( ) \_\_\_\_\_ ( ) \_\_\_\_\_ ( ) \_\_\_\_\_  
Home Work Cell

Which is the best way to reach you during the day? (Please circle)

e-mail home phone work phone cell phone

Current Employer or School \_\_\_\_\_  
Name Position Phone

Emergency Contact \_\_\_\_\_  
Name Relationship & Phone #

Your birthday \_\_\_\_/\_\_\_\_/\_\_\_\_ I am at least 14 years old. (Please circle) yes no  
mo / day / year is optional

If this is a placement to meet school requirements, please list final day of service \_\_\_\_\_

If retired, briefly explain work experience \_\_\_\_\_

Interests/ Hobbies \_\_\_\_\_

Volunteer Experience \_\_\_\_\_

Reference (non-family) \_\_\_\_\_  
Name Phone/e-mail

