

**FRANNIE PEABODY CENTER  
VOLUNTEER APPLICATION**

NAME: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ WORK: \_\_\_\_\_

CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_ EMAIL: \_\_\_\_\_

MAY WE LEAVE A MESSAGE WITH YOU AT WORK, HOME, OR EMAIL? \_\_\_\_\_

WHAT ARE YOUR INTERESTS?

\_\_\_\_\_

DO YOU HAVE ANY DEGREES, LICENSES, OR CLINICAL CERTIFICATION THAT MAY BE USED IN YOUR VOLUNTEER EXPERIENCE? IF SO PLEASE LIST:

\_\_\_\_\_

I am interested in volunteering (please circle)      WEEKLY              MONTHLY              PROJECT BASIS?

If weekly, would you be interested in volunteering at our front desk? (circle)              **Yes**              **No**

Availability	MON	TUES	WED	THURS	FRI	SAT	SUN
9am-1pm							
1pm-5pm							
After 5pm							

WHAT PREVIOUS VOLUNTEER EXPERIENCES DO YOU HAVE (IF ANY)?

\_\_\_\_\_  
\_\_\_\_\_

DRIVER'S LICENSE #: \_\_\_\_\_ INSURANCE COMPANY: \_\_\_\_\_

POLICY #: \_\_\_\_\_ AGENT: \_\_\_\_\_

PHONE: \_\_\_\_\_

DO YOU HAVE A HISTORY OF CRIMINAL CONVICTION? YES NO (CIRCLE)

IF YES, OFFENSE/DATE: \_\_\_\_\_

REFERENCES WE MAY CONTACT WITH YOUR PERMISSION:

NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_  
OCCUPATION: \_\_\_\_\_ PHONE: \_\_\_\_\_

NAME: \_\_\_\_\_ ADDRESS: \_\_\_\_\_  
OCCUPATION: \_\_\_\_\_ PHONE: \_\_\_\_\_

ARE THERE ANY PRECAUTIONS REGARDING YOUR HEALTH OF WHICH WE SHOULD BE MADE AWARE? \_\_\_\_\_

IN CASE OF EMERGENCY WE SHOULD CONTACT:

NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

RELATIONSHIP TO YOU: \_\_\_\_\_

*I understand that I am not an employee of Frannie Peabody Center and that any duties that I perform are as a volunteer. I agree to abide by the procedures set forth by Frannie Peabody Center for my assigned work duties. I also understand that it is my responsibility to update any address, emergency or other changes to information on this form.*

*By my signature, I authorize Frannie Peabody Center to conduct a background check of my driving record (as necessary) and my criminal record.*

PRINTED NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

Please fill out application and mail or email to:

Manuela Arundel ([marundel@peabodycenter.org](mailto:marundel@peabodycenter.org))  
Frannie Peabody Center  
30 Danforth St. Suite 311  
Portland, Maine 04101