Shirley Mae Dove Foundation Volunteer Application Form

Name:	
Phone Number	Date of Birth:
Home Address:	
City/ State:	Zip:
Employed By:	Phone:
Address:	
May you be called at work	()yes()no</td
Formal Education:(Highest	t level of Education):
	nguage: () yes () no If yes What: Do you have regular access to a car?
	ties:
	olunteer work?(list all previous volunteer
What are the reasons you Foundation?	want to volunteer with The Shirley Mae Dove

Have you had any experience in Non Profits and Thrift Stores? () yes () no If so, Please explain:		
How did you learn about our progra	m?	
Have you ever been convicted of a c	rime other than a traffic violation?	
If Yes, what charge?	Convicted	
Do you consent to a routine crimina () Yes () no	I check of your criminal records?	
Please list 3 references of people you know well, other than relatives, preferably to whom you have worked in either a paid or volunteer capacity. If you are currently working, either paid or a volunteer, please include your current supervisor name and number. 1)		
2)		
3)		
How long have you lived in the area	?	
The Shirley Mae Dove Foundation, Inc. reserves the the suitability of anyone responsible for this confident the strictest confidence.		
Applicant Signature	Date	