

**The Village Chicago  
Volunteer Application**
**General Information**

Dr. Mr. Mrs. Ms.	Last Name:	First Name:	Middle:
Preferred Name:		Birth date:        /        /	

Street Address:		Apt #:
City:	State:	Zip:
Home Phone:	Work Phone:	Cell Phone:
E-Mail:		

**Person to Notify in Case of Emergency**

Last Name:	First Name:	Relation:
Street Address:		Apt #:
City:	State:	Zip:
Home Phone:	Work Phone:	Cell Phone:
E-Mail:		

**How would you like to help?**

<input type="checkbox"/> Help in Office	<input type="checkbox"/> Gardening	<input type="checkbox"/> Service Committee
<input type="checkbox"/> Driver (driver forms)	<input type="checkbox"/> Snow Removal	<input type="checkbox"/> Program Committee
<input type="checkbox"/> Driver/Escort (driver forms)	<input type="checkbox"/> Meal Prep and Delivery	<input type="checkbox"/> LGBTQ Task Force
<input type="checkbox"/> Non-Driver Escort	<input type="checkbox"/> Pet Care	<input type="checkbox"/> Marketing & Communications
<input type="checkbox"/> Programs & Special Events	<input type="checkbox"/> Errands	<input type="checkbox"/> Membership Committee
<input type="checkbox"/> Home Repair/Maintenance	<input type="checkbox"/> Organizing	<input type="checkbox"/> Photography
<input type="checkbox"/> Computer Assistance	<input type="checkbox"/> Visiting/Companionship	<input type="checkbox"/> Writing/Editing
<input type="checkbox"/> Other:		

**Availability**

Times	Monday	Tuesday	Wednesday	Thursday	Friday	Weekend
Morning(8a-12p)						
Afternoon (12p-5p)						
Evening(5p-10p)						

When are you not available?

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**List of Personal and/or Work References**

Name:	Phone:	Email:	Title/Relation:

**The Village Chicago  
Volunteer Application****Volunteer & Confidentiality Agreement/Signature**

By submitting this application, I affirm that the facts set forth in it are true and complete. As a The Village Chicago volunteer, I will agree to the following: 1) I will offer my time without monetary compensation 2) I agree to conform to all of the The Village Chicago procedures and regulations 3) I understand that if I am accepted as a volunteer, any false statements, omissions, or other misrepresentations made by me on this application may result in my dismissal 4) I authorize The Village Chicago to contact my references and perform a background check 5) I agree to indemnify The Village Chicago against and hold it harmless from all loss and expense arising out of any act, neglect or fault on my part. Finally, as a Village volunteer I understand it is imperative to protect the confidentiality of all information pertaining to any Village member, non-member or other volunteer or client associated with The Village Chicago, including any unauthorized possession, use, copying, reading or disclosure of applicable records, ledgers or files.

Name (please print): \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ SSN: \_\_\_\_\_  
(For background check)Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Must be signed by parent/guardian if volunteer is under 18 years old)

Your signature indicates your agreement to adhere to these responsibilities if placed as a volunteer. The Village is not obligated to provide a placement, nor are you obligated to accept the position offered. The information you have submitted will not be given to any other parties without your permission.

**Volunteer Background Check**

A volunteer background check is required for all The Village Chicago volunteers and staff. We keep this information secure.

**FOR OFFICE USE ONLY**

Background check confirmed: \_\_\_\_\_ By: \_\_\_\_\_

Volunteer start date: \_\_\_\_\_ Volunteer end date: \_\_\_\_\_

Notes:  
\_\_\_\_\_  
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