



VOLUNTEER APPLICATION

Submit completed application to volunteer@drcgk.org.

Volunteers play a vital role in the advancement of our mission. Thus, we are grateful for your interest in assisting our organization. All volunteer applications are reviewed with consideration of current volunteer needs and opportunities. Your completed application will be held securely and confidentially.

Personal Information:

Title:

Legal Name:

Preferred Name / Nickname:

Address:

City:

State:

Phone: (Home)

(Mobile)

Email:

Date of Birth:

Driver's License #:

Last 4 of SS#:

Area(s) of interest:

Availability to start:

Volunteer Type: Recurring One-and-Done

List any special talent(s) or skill(s) you believe would be beneficial to our organization:

Medical Conditions / Physical limitations:

Have you been convicted of a felony in the last 10 years? Yes No

Emergency Contacts:

Name:

Relationship:

Phone: (Home)

(Mobile)

Name:

Relationship:

Phone: (Home)

(Mobile)

All volunteers are subject to a background screening at any time.