

RUTH'S HOUSE

VOLUNTEER APPLICATION FORM

PLEASE RETURN YOUR COMPLETED APPLICATION:

MAIL TO: Samantha Heath
Ruth's House, Inc
P.O.Box 2843
Washington, NC 27889

FAX (252) 946-0709

EMAIL TO: sheltermanager@suddenlinkmail.com

Name

Phone Number

Date of Birth (day and month only)

Home Address

City, State

Zip

Email

Employed By (If Employed)

Phone Number

May you be called at work? Yes No

Do you speak a foreign language? Yes No If yes, which language _____

Do you drive? Yes No Do you have regular access to a car? Yes No

List current and previous volunteer work (list all previous volunteer work including brief description of duties and activities, dates of service.):

Have you ever been convicted of a crime other than a traffic violation? Yes No

If yes, what charge? _____ Date convicted: _____ Where _____

If required, do you consent to a routine check of your criminal records? Yes No

Please list three references of people who know you well, other than relatives, preferably for whom you have worked in either a paid or volunteer capacity. If you are currently working, either paid or as a volunteer, please include the name of your supervisor.

	Name	Address	Zip Code	Phone	Relationship
1.	_____				
2.	_____				
3.	_____				

How long have you lived in the area? _____

What area would you like to volunteer at Ruth’s House?

Please check all areas of interest.

- Shelter Monitor**
 - 8am – Noon
 - Noon-5pm
 - 5pm – 9pm
 - 9pm – 8am
- Fundraising Team Member**
- Volunteer Coordinator**
- Movers**
 - Have truck Do not have truck
- Ruth’s House Antiques Retail Shop**
 - Marketing & Promotions Team
 - Merchandising & Display Team
 - Cleaning Team
 - Pricing Team
 - Sales Team (those who use the cash register)
 - Greeters Team (those who don’t use the cash register)
 - Donations Team- recruiting, selection, sorting, categorizing
- Flower Bed Maintenance**
- Shelter Maintenance and Repair**
- Other (Please State):**

I hereby certify that the facts set forth in the above application are true and complete to the best of my knowledge. I also understand that this is not an application for paid employment. **I will keep all client information and general information about Ruth’s House confidential. This is an important part of my contract to become a volunteer/intern at Ruth’s House. I understand that a breach of confidentiality will void my volunteerism/internship and I will be terminated immediately.** Ruth’s House, Inc. reserves the right to make any checks deemed appropriate as to the suitability of anyone responsible for this confidential work. All information obtained will be held in the strictest confidence.

Applicant Signature

Date