



Cornerstone Youth Center Volunteer Application

Our organization encourages the participation of volunteers who support our mission. If you agree with our mission and are willing to be interviewed and trained in our procedures, we encourage you to fill out this application. The information on this form will be kept confidential and will help us to find the most satisfying and appropriate volunteer opportunities for you.

Cornerstone Youth Center is an equal opportunity organization. Volunteer applicants are considered for participation without regard to race, color, national origin, religion, sex, age, sexual orientation, disability, citizenship status, or any other basis prohibited by law. Cornerstone Youth Center will comply with its obligation to provide reasonable accommodations to qualified individuals with disabilities. Cornerstone is committed to selecting volunteers based on their character, ethics, interest and ability to participate in our programs. It is imperative that the character and reputation of our volunteers be above reproach. For this reason, it is necessary that Cornerstone Youth Center verify information about each applicant's background. This is for the protection of our employees, volunteers and participants.

Thank you for your interest in our organization.

Name _____

Address _____

Phone _____ Email _____

What skills and talents do you have that you feel will benefit our organization? _____

Interests: Please place a checkmark next to the areas you are interested in volunteering

___ Administration

___ Events

___ Program

___ Fundraising

___ Communications

___ Newsletters

___ Food Distribution

___ Fish Fry

___ Cookie Walk

___ Speaker

___ Maintenance

___ Fall Festival

___ Garden

___ Transportation

___ Card Writer

___ Other: _____

Please list days and times you are available to volunteer: _____



Cornerstone Youth Center Volunteer Application

Do you have a valid driver's license? **YES** **NO**

Have you ever been convicted of the violation of any laws? **YES** **NO**

If yes, please explain: _____

Do you have any physical conditions that may limit your activities? **YES** **NO**

If yes, please explain: _____

Do you have any previous volunteer experience? **YES** **NO**

If yes, please share what you have done: _____

In case of an emergency, please contact:

Name _____

Phone Number _____ Relation to volunteer _____

Cornerstone conducts a background check for any persons who are working or volunteering in our organization. Do we have your permission to conduct a background check? **YES** **NO**

Cornerstone often posts pictures of activities that are taking place at our organization and of activities that are happening in other locations. Do we have your permission to post these pictures on social media pages, in our annual reports and in flyers promoting our organization?

YES **NO**

As a volunteer of Cornerstone Youth Center, I agree to abide by the policies and procedures. I understand I will be volunteering at my own risk and that the organization, its employees and affiliates, cannot assume responsibility for any accident, injury or health problem which may arise from any volunteer work I perform for the organization. I agree that all work I do is on a volunteer basis and I am not eligible to receive any monetary compensation.

Signature: _____ **Date:** _____