

# VOLUNTEER APPLICATION



10901 E Winner Rd., Independence, MO 64052-0169 816/254-3652

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Middle Initial \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Best Time to Call \_\_\_\_\_ Phone No. Home \_\_\_\_\_ Work \_\_\_\_\_

Social Security No. \_\_\_\_\_ Birth Date \_\_\_\_\_

How did you find out about our volunteer opportunities?

\_\_\_\_\_

Through my involvement with CMHS, I hope to:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I would like to volunteer to:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I am willing to work up to \_\_\_\_\_ hours per week during these times:

\_\_\_\_\_ Weekday Mornings \_\_\_\_\_ Weekday Afternoons \_\_\_\_\_ Weekday Evenings \_\_\_\_\_ Weekends

What time commitment do you desire? \_\_\_\_\_ 1-3 Months \_\_\_\_\_ 3-6 Months \_\_\_\_\_ 6-12 Months

I am most interested in a \_\_\_\_\_ ongoing assignment \_\_\_\_\_ Occasional volunteer assignment

Transportation: \_\_\_\_\_ Have the use of a car \_\_\_\_\_ rely on others \_\_\_\_\_ Walking distances only

Please list previous experiences (volunteer, paid, or educational) that you would like to use in a volunteer position:

**Activity Organization Date**

\_\_\_\_\_ Activity Organization Date

**Activity Organization Date**

\_\_\_\_\_ Activity Organization Date

I understand that I may encounter patients and/or their records and that these are to be held in strictest confidence.

Volunteers are a vital part of Comprehensive Mental Health Services, Inc.'s mission. In order for our work to continue successfully, we ask that you give any volunteer assignment the same careful, conscientious effort you would to a paid position. I understand that the above information is voluntarily supplied and may be disclosed for Comprehensive Mental Health Services' purposes and that as a CMHS volunteer, I will not be paid for my services. I also understand that I may be required to sign a *Release and Waiver of Liability*

Before I can begin volunteering:

Signature \_\_\_\_\_ Date \_\_\_\_\_