



Light of Loving Kindness Chicago, IL

Volunteer Application

Applicant Information

Full Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

_____ City State ZIP Code

Phone: _____ Email _____

Interests: Tell us about your gifts, talents, skills, and in which areas you would like to volunteer:

Availability: Which days and hours are you available to volunteer?

How many hours per week/month are you available to volunteer?

Experience: Summarize your previous volunteer experience

References

Please list three references.

Full Name: _____ Relationship: _____
Email: _____ Phone: _____

Full Name: _____ Relationship: _____
Email: _____ Phone: _____

Full Name: _____ Relationship: _____
Email: _____ Phone: _____

Have you ever been convicted of a felony? YES NO

If yes, explain: _____

Military Service

Branch: _____ From: _____ To: _____

Rank at Discharge: _____ Type of Discharge: _____

If other than honorable, explain: _____

Disclaimer and Signature

*I certify that my answers are true and complete to the best of my knowledge.
If this application leads to employment, I understand that false or misleading information in my application or interview may result in my release.*

Signature: _____ Date: _____