



# GHAC Volunteer Application

Date	Date of Birth	Age Group (14-17) <input type="checkbox"/>	(18-24) <input type="checkbox"/>	(25-64) <input type="checkbox"/>	(65 and over) <input type="checkbox"/>
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## Contact Information

Last Name		First		Middle	
Home Address		Apt/Bldg	City	State	Zip Code
Business Address		Suite	City	State	Zip Code
My preferred mailing address is: Home address <input type="checkbox"/> Business address <input type="checkbox"/> County of Residence _____					
Home Phone	Business Phone		Mobile Number	E-mail Address	
May we contact you at work? Yes <input type="checkbox"/> No <input type="checkbox"/>		Work e-mail			
Employer			Occupation		Retired <input type="checkbox"/>

## Emergency Contact

Name	Day Phone	Evening Phone	Relationship
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## Volunteer Experience

List any current or past community service involvement

Organization \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_ Job Title \_\_\_\_\_

Name of supervisor \_\_\_\_\_ Area of service \_\_\_\_\_

Have you ever volunteered with Red Cross before?  Yes  No  Where/When \_\_\_\_\_

Have you ever been an instructor in another Chapter?  Yes  No  If yes where? \_\_\_\_\_

Have you ever had your instructor authorization withdrawn?  Yes  No If yes, please explain: \_\_\_\_\_

## Reference Full Name & Phone Number

#1 \_\_\_\_\_

#2 \_\_\_\_\_

## Current License and Certifications (other than those received through the Red Cross)

Type	Number (optional)	State	Expiration Date
Type	Number (optional)	State	Expiration Date

## Education (highest level achieved)

Institution Name	City/State	Degree/Major	Date Attended
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## Language Skill Proficiencies

Language:	<b>Speak:</b>	High <input type="checkbox"/>	Medium <input type="checkbox"/>	Low <input type="checkbox"/>	<b>Read:</b>	High <input type="checkbox"/>	Med <input type="checkbox"/>	Low <input type="checkbox"/>
	<b>Write:</b>	High <input type="checkbox"/>	Med <input type="checkbox"/>	Low <input type="checkbox"/>				
Language:	<b>Speak:</b>	High <input type="checkbox"/>	Medium <input type="checkbox"/>	Low <input type="checkbox"/>	<b>Read:</b>	High <input type="checkbox"/>	Med <input type="checkbox"/>	Low <input type="checkbox"/>
	<b>Write:</b>	High <input type="checkbox"/>	Med <input type="checkbox"/>	Low <input type="checkbox"/>				

## Skills/Interests

Accounting <input type="checkbox"/>	Driving <input type="checkbox"/>	Project Management <input type="checkbox"/>
Administrative Support/Phones <input type="checkbox"/>	Events Coordination <input type="checkbox"/>	Public Speaking <input type="checkbox"/>
Casework (Military/Disaster) <input type="checkbox"/>	Filing <input type="checkbox"/>	Sewing/Knitting <input type="checkbox"/>
Communications/Journalism <input type="checkbox"/>	Fund Raising/Grant Writing <input type="checkbox"/>	Teaching <input type="checkbox"/>
Computer Supports (ISM) <input type="checkbox"/>	Graphic Design/Photography <input type="checkbox"/>	Volunteer Advisor <input type="checkbox"/>
Counseling (Mental Health) <input type="checkbox"/>	Management <input type="checkbox"/>	Warehouse/Distribution <input type="checkbox"/>
Data Entry <input type="checkbox"/>	Nursing <input type="checkbox"/>	Youth Advisor <input type="checkbox"/>
		Other (specify) <input type="checkbox"/>

## As a volunteer, would you like to:

- |   |  |
|---|--|
| <input type="checkbox"/> Work with youth program                            | <input type="checkbox"/> Provide First Aid at community events                 |
| <input type="checkbox"/> Drive patients to medical appointments             | <input type="checkbox"/> Provide leadership on a committee                     |
| <input type="checkbox"/> Transportation scheduler/dispatcher                | <input type="checkbox"/> Assist with special projects                          |
| <input type="checkbox"/> Provide clerical support                           | <input type="checkbox"/> Help military servicemen, veterans & their families   |
| <input type="checkbox"/> Make presentations on behalf of Red Cross          | <input type="checkbox"/> Sew, knit or crochet baby items                       |
| <input type="checkbox"/> Respond to local and/or national disaster          | <input type="checkbox"/> DAT Team member - respond to local fire/flood clients |
| <input type="checkbox"/> Teach Red Cross courses (Health & Safety/Disaster) | <input type="checkbox"/> Other _____   |

## Availability As A Volunteer

- Monday AM  Tuesday AM  Wednesday PM  Thursday AM  Friday AM  Weekends
- Monday PM  Tuesday PM  Wednesday PM  Thursday PM  Friday PM  Evenings (After 5pm)

## A "yes" answer to the following italicized questions does not necessarily disqualify an applicant.

*Have you ever been convicted of a felony or misdemeanor within the past 24 months, which resulted in imprisonment?  
If yes, please explain.*

*Why do you wish to volunteer with the American Red Cross (optional).*