



## VOLUNTEER APPLICATION

Personal information provided is confidential.

Family Name	Date
Given Name(s)	Day Telephone Number
Address	Evening Telephone Number
City	
State	

Age, Gender, Labor Force Status and Ethnicity are for statistical purposes only.

Age Group	Labor Force Status	Ethnic Identity	How did you hear about Sienna Crest?
<input type="radio"/> Under 20 years <input type="radio"/> 20-24 years <input type="radio"/> 25-29 years <input type="radio"/> 30-39 years <input type="radio"/> 40-49 years <input type="radio"/> 50-59 years <input type="radio"/> 60 years and over	<input type="radio"/> Part-time paid Employment <input type="radio"/> Full-time paid Employment <input type="radio"/> Retired <input type="radio"/> Seeking paid work <input type="radio"/> Unpaid Labor Force <input type="radio"/> Student	<input type="radio"/> Asian <input type="radio"/> Black or African American <input type="radio"/> White <input type="radio"/> Hispanic or Latino <input type="radio"/> American <input type="radio"/> Indian/Alaska Native <input type="radio"/> Native Hawaiian/Pacific Islander <input type="radio"/> Two or more races	<input type="radio"/> Word of Mouth <input type="radio"/> Pamphlet <input type="radio"/> Newspaper/Radio <input type="radio"/> Internet <input type="radio"/> Other
Present Occupation, if applicable:			Gender: Male/Female

What goals do you wish to achieve through voluntary work (Please choose all that apply)		
<input type="radio"/> Gain new skills/knowledge	<input type="radio"/> Meet people	<input type="radio"/> Help others
<input type="radio"/> Contribute to the community	<input type="radio"/> Discover new interests	<input type="radio"/> Get work experience
<input type="radio"/> Enhance employment potential	<input type="radio"/> Achieve personal growth	<input type="radio"/> Explore new fields of work

Training or courses you have completed:  
 \_\_\_\_\_  
 \_\_\_\_\_

Educational qualifications:  
 \_\_\_\_\_  
 \_\_\_\_\_

Please choose all that apply:  
 Have driver's license  
 Have own transport  
 Prefer to work mornings  
 Prefer to work afternoons  
 Prefer to work evenings  
 Available to work weekdays  
 Available to work weekends  
 \_\_\_\_ Number of hours able to work per week

Preferred Location: \_\_\_\_\_

I authorize Sienna Crest Assisted Living, Inc. to keep electronic and hard-copy records of my information.

Volunteer's Signature: \_\_\_\_\_ Dated: \_\_\_\_\_