



Volunteer Application

Personal Information:

Name: _____

E-mail: _____

Address: _____

City/State/Zip: _____

Phone Number: Home _____

Cell _____

Date of Birth: _____

Emergency Contact:

Name: _____

Phone Number: _____

Email: _____

Volunteer Area of Interest:

Classroom
Marketing & Development/ Auction
HR

Kitchen
Front Desk/ General Administration
Other: _____

Location Preference:

Yesler Terrace
Sand Point/Mercy Magnuson

Beacon Hill
Administrative Office

Write the times that you are available to volunteer:

	Monday	Tuesday	Wednesday	Thursday	Friday
AM					
PM					

Hours interested in volunteering in a week: _____

How many days a week: _____

Are you a current or former DLEC/Head Start or DLEC parent/guardian/family member?

If Yes, Name(s) of child(ren): _____

Years attended: _____



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Interested in receiving agency e-newsletter?

YES

NO

How did you hear about Denise Louie Education Center? _____

Criminal Background:

Please complete the following questions. **Do not leave blank.** Please write "N/A" if not applicable. This information is required by childcare licensing and Head Start Performance. **Applications received with this section incomplete will not be considered.**

1. Please list **all** pending and prior criminal arrests and charges related to the sexual abuse of children

2. Please list **all** convictions related to other forms of child abuse and/or neglect: _____

3. Please list **any** felony convictions: _____

References:

Please list three references. We will be contacting at least two references prior to volunteering.

a. Name: _____

Relationship: _____

Telephone(s): _____ Email: _____

b. Name: _____

Relationship: _____

Telephone(s): _____ Email: _____

c. Name: _____

Relationship: _____

Telephone(s): _____ Email: _____



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I understand that a condition of volunteering is that Denise Louie Education Center must conduct local and national background checks. Therefore, if offered the volunteer opportunity by Denise Louie Education Center I hereby authorize Denise Louie Education Center to conduct local and national background checks for the purposes of evaluating whether I am qualified for the position. I understand that Denise Louie Education Center will utilize an outside firm(s) to assist in checking such information. I also understand that I may withhold my permission and in such a case my application will not be processed further.

I certify that the above is true and correct to the best of my knowledge. I understand that any untrue or misleading answers are cause for rejection of my application. I authorize Denise Louie Education Center to verify statements contained in this application. I authorize Denise Louie Education Center to contact references listed in this application.

Signature _____ Date _____