



WESLEY HOUSING VOLUNTEER APPLICATION

opening doors to brighter futures

PERSONAL INFORMATION

Name: Mr./Mrs./Ms./Dr. _____ D.O.B: _____

Street Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

Email: _____ Gender: _____

Employer/School/Group Affiliation (if applicable): _____

If you need documentation for community service hours, please provide details: _____

If you have any limitations that affect your mobility, communication, or ability to perform certain tasks, please explain.

How did you hear about us? _____ Want Wesley Housing emails? Y N

EMERGENCY CONTACT INFORMATION

Name: _____ Phone Number: _____

Email: _____ Relationship: _____

VOLUNTEER PREFERENCES & AVAILABILITY

| I'm interested in volunteering at the following locations: | I'm interested in the following activities: | I'm available: |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Community Resource Centers <i>Children & Families</i> <ul style="list-style-type: none"> <input type="checkbox"/> Whitefield (Arlington) <input type="checkbox"/> Colonial Village (Arlington) <input type="checkbox"/> Lincolnia (Alexandria) <input type="checkbox"/> Wexford Manor (Falls Church) | Administrative Adult Education Adult Recreation Fundraising/Sponsorship Youth After School Program Teen Education Summer Camp Health & Fitness Holiday/Seasonal Assistance Gardening/Clean Up Food Distribution Food Pantry (AFAC/Panera) Marketing/Communications Other | Sunday <input type="checkbox"/> Morning <input type="checkbox"/> Afternoon <input type="checkbox"/> Evening Monday <input type="checkbox"/> Morning <input type="checkbox"/> Afternoon <input type="checkbox"/> Evening Tuesday <input type="checkbox"/> Morning <input type="checkbox"/> Afternoon <input type="checkbox"/> Evening Wednesday <input type="checkbox"/> Morning <input type="checkbox"/> Afternoon <input type="checkbox"/> Evening Thursday <input type="checkbox"/> Morning <input type="checkbox"/> Afternoon <input type="checkbox"/> Evening Friday <input type="checkbox"/> Morning <input type="checkbox"/> Afternoon <input type="checkbox"/> Evening Saturday <input type="checkbox"/> Morning <input type="checkbox"/> Afternoon <input type="checkbox"/> Evening |
| Older Adults/Persons with Disabilities Springdale (Falls Church) Coppermine Place (Herndon) Agape House (Fairfax) Quarry Station (Manassas) The Fallstead (McLean) | | |
| Main Office <ul style="list-style-type: none"> <input type="checkbox"/> Wesley Housing (Alexandria) | | |

Please list any special skills, qualifications, languages, hobbies, or other related volunteer experiences.

REFERENCES

Please list two people other than relatives who would be willing to serve as personal references.

Name: _____ Phone Number: _____

Relationship: _____ Number of Years Known: _____

Name: _____ Phone Number: _____

Relationship: _____ Number of Years Known: _____

If the position requires use of your personal vehicle to perform duties, please list your vehicle insurance company and policy expiration date. _____

RELEASE

I certify that the facts contained herein are true and complete to the best of my knowledge and understand that if I volunteer for Wesley Housing Development Corporation or any of its properties, any misrepresentations, falsifications, or omissions shall be grounds for dismissal or refusal of volunteer service. I understand that a reference may be requested that will include information as to my character, work habits, performance, and experience. I hereby give consent for Wesley Housing to conduct a criminal background check if applicable for volunteer position(s).

Signature: _____ Today's Date: _____

If under 18, parent/guardian must sign above and print name here: _____

Thank you for taking time to complete this application. Please email form to ajackson@whdc.org.

Upon receipt and review, you will be contacted by Wesley Housing staff. We look forward to hearing from you and appreciate your support of our mission.