



Volunteer Application

Family Promise of Spokane relies on invested volunteers. If you agree with our mission and are open to being background checked and trained, we encourage you to fill out this application. The information on this form will be kept private. Once complete, please return to Family Promise by mail or in person at 2002 E. Mission Ave Spokane, WA 99202.

Contact Information

Full Name: _____ Phone Number: _____

Email Address: _____

Address: _____

City: _____ State: _____ Zip: _____

Preferred Method of Communication Phone Call Text Email

Volunteer Interest

Have you volunteered with us before? Yes No

If yes, in what capacity have you volunteered previously? _____

Please check any area that you might be interested in volunteering.

- | | | | |
|---|---|---|---|
| <input type="checkbox"/> Teaching/Education | <input type="checkbox"/> Moving Families In | <input type="checkbox"/> Outreach/Fundraising | <input type="checkbox"/> Facilities Maintenance |
| <input type="checkbox"/> Family Support | <input type="checkbox"/> Organizing/Cleaning | <input type="checkbox"/> Admin/Office | <input type="checkbox"/> Deliveries |
| <input type="checkbox"/> Kid's Activities | <input type="checkbox"/> Legal/Financial Help | <input type="checkbox"/> Events | <input type="checkbox"/> Trade-Skills |
| <input type="checkbox"/> Counseling/Mentoring | <input type="checkbox"/> Other _____ | | |

Required Background Check Info

To interact with guests, we run background checks on all volunteers.

Full Legal Name _____ Any former names? _____

Birthdate (MM/DD/YYYY): _____ Sex: _____

Have you been convicted of a crime? Yes No

I hereby authorize any law enforcement to furnish Family Promise of Spokane information related to my criminal history. I hereby release Family Promise of Spokane and the law enforcement agencies furnishing information, from all liability resulting from the furnishing of this information. I certify that the statements made by me on this form are true, complete, and correct to the best of my knowledge and are made in good faith. I understand that any false statement made herein will void my participation in any programs at Family Promise of Spokane.

Signature: _____ Date: _____