

CAMP FIRE USA LONE STAR COUNCIL
 4411 Skillman
 Dallas, Texas 75206
 Phone: 214 824 1122 FAX: 214 824 1148

VOLUNTEER APPLICATION

PLEASE PRINT

Date of Application ____/____/____ Name _____
(last) (first) (middle) (maiden /other)

Address _____ Do you have a driver's license? Yes No
(street) (city) (state) (zip)

Phone: (Home) (____) _____ (Cell) (____) _____ Length of Residence in Texas: ____ Years

Hours Available to Work: ___Daytime ___Evening ___Weekends Days Available (circle): MON TUES WED TH FRI SAT SUN

Have you ever been convicted of or plead nolo contendere/no contest to any criminal offense other than a routine traffic violation? ___Yes ___No (Such conviction may be relevant if job related, but does not bar you from participating.) If yes, please explain.

Are you presently charged with any violation of the law other than traffic violations? ___Yes ___No. If yes, please explain.

SKILLS AND QUALIFICATIONS: Summarize any areas of interest or special skills and qualifications acquired from employment or other experiences that may qualify you for volunteering with our organization.

EMPLOYMENT HISTORY:

List your last three (3) employers, assignments or volunteer activities, start with the most recent, including military experience.

Employer:	Employed From:	Employed To:
Address:	Supervisor:	
	Nature of Work Performed:	
Telephone Number:		
Job Title:	Reason for Leaving:	

Employer:	Employed From:	Employed To:
Address:	Supervisor:	
	Nature of Work Performed:	
Telephone Number:		
Job Title:	Reason for Leaving:	

Employer:	Employed From:	Employed To:
Address:	Supervisor:	
	Nature of Work Performed:	
Telephone Number:		
Job Title:	Reason for Leaving:	

EDUCATIONAL BACKGROUND:

<u>Name and Location</u>	<u>Years Completed</u>	<u>Course of Study/ Diploma/Degree</u>
High School/GED _____		
College _____		
Other _____		

PERSONAL REFERENCES:

<u>Years Known</u>	<u>Name</u>	<u>Address/City/Zip</u>	<u>E-mail/Telephone</u>
1.			E-mail Address _____ Area Code () _____
2.			E-mail Address _____ Area Code () _____
3.			E-mail Address _____ Area Code () _____

VOLUNTEER HISTORY: List any agency or organization for whom you have volunteered:

<u>Agency Name</u>	<u>Job Title</u>	<u>Duties</u>	<u>Contact Phone No.</u>
1. _____			
2. _____			

It is understood and agreed upon that any misrepresentation by me in this application will be sufficient cause for cancellation of this application and/or prohibition of volunteering for any Camp Fire program or facility. I give Camp Fire the right to investigate all references and to secure additional information about me, from sources I have not listed. I hereby release from liability Camp Fire and its representatives for seeking such information, and all other persons, corporations or organizations for furnishing such information.

Camp Fire is an Equal Opportunity Employer. Camp Fire does not discriminate in volunteer placement and no question on this application is used for the purpose of limiting or excluding any applicant's consideration for volunteer placement on a basis prohibited by local, state or federal law. This application is current for only 60 days. At the conclusion of this time, if I have not heard from Camp Fire and still wish to be considered for volunteer placement, it will be necessary to fill out a new application.

I understand that just as I am free to resign at any time, Camp Fire reserves the right to terminate my volunteer placement at any time, with or without cause and without prior notice. I understand that no representative of Camp Fire has the authority to make any assurances to the contrary.

Signature of Applicant _____ Date _____