

**SOUTH WINDSOR HUMAN SERVICES
VOLUNTEER APPLICATION
150 Nevers Road, South Windsor, CT 06074
860-648-6361**

Please check which programs you are applying for:

Meals on Wheels volunteers must fill out a separate application.

_____ Friendly Visitor/Shopper	_____ Gardens	_____ Newsletter collating
_____ Kitchen Assistance	_____ Senior Activities	_____ Birthday Cheer
_____ Trip Leader	_____ Triad Volunteer	_____ Reading in Schools
_____ Food Bank	_____ Community Service	_____ Fitness Center

Name: Mr. Mrs. Ms. _____
(last) (first) (mi)

Home address _____
(street) (town/zip)

Email address: _____

Home Phone _____ Cell Phone _____

Date of birth: _____

Emergency contact: _____
(name) (address)

Phone: _____ Relationship: _____

Availability: _____

Have you ever been arrested for anything? _____

Do you own an automobile? _____

Insurance company: _____ Policy: _____

How did you hear about our programs? _____

List any hobbies you would like to share: _____

References

Please list three references who can be contacted via mail who are **not** related to you:

1. Name _____
Address: _____
Street Town Zip

2. Name _____
Address: _____

Street	Town	Zip
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3. Name _____
Address: _____

Street	Town	Zip
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Police Check Release

As a routine part of our application process, we are asking you to complete the form below. We feel this protects the interest of the population we serve. Thank you for your assistance.

I, _____ hereby consent to allow the South Windsor Human Services Department to obtain information from the Police Department concerning the undersigned contained in police and/or court records.

Signature: _____

Parent/Guardian (if under 18): _____

CT Drivers License: _____

Date of Birth: _____

Date: _____