The Arc of Cumberland & Perry Counties Volunteer Form

Please fill out the following form and return to:
71 Ashland Avenue, Carlisle PA 17013; C/O Development Department
Or fax to: 717.249.9411

Personal Information:

Last: _____ First: _____ Middle: _____

Address: _____

City: _____State: _____ Zip: _____

Telephone: _____ Other: _____

Email Address: _____

Are you over the age of 18? Yes ☐ No ☐

Emergency Notification:

Name: _____ Relationship: _____

Telephone: _____ Other: _____

Background:

Have you ever been convicted of a felony? Yes ☐ No ☐

If so, when and where? _____

_____

Nature of Offense: _____

Some positions may require a background check, child abuse check, or a physical/TB-test; will you be able to provide those? Yes ☐ No ☐

Interests:
What are your specific Interests in CPARC?

- ☐ Administrative
- ☐ Advocacy/Family Education/Neighbors Program
- ☐ Adult Day Services
- ☐ Child Care
- ☐ Fund Raising/Public Relations
- ☐ Residential Services
- ☐ Vocational Training
- ☐ Special Events
- ☐ Other_____

Do you have a valid driver's license: Yes ☐ No ☐

Experience:

Previous Volunteer Experience (Please include contact name and phone number):

_____

_____

Why do you want to volunteer at The Arc of Cumberland & Perry Counties?

_____

_____

Education:

Name of Colleges, Business or Technical Schools	City/State	Dates Attended	Phone No.

High School Attended	City/State	Dates Attended	Diploma/GED
			Y ☐ N ☐

References:

Please list three references, not related to you, who we may contact.

Name	Occupation/Employer	Address	Phone Number

Commitment:

What would be your availability to volunteer with CPARC?

Availability: S M T W TH F S Daytime Hours OR Evening Hours

Preferred Amount of Hours to Volunteer at CPARC: _____ a week.

I am interested only in Volunteering for Special Projects: ☐

I agree to comply with the rules and regulations of CPARC. I affirm that all statements and answers are true to the best of my knowledge and that I have not withheld any information. I authorize CPARC to conduct any necessary and reasonable investigation with respect to my form, and release CPARC and personal references from any liability for damage caused by giving or receiving information or opinions as to my employment or character. It is understood that any false statement may be considered sufficient cause for rejection.

Signature: _____ Date: _____