

P I L L A R & V I N E

Application for Volunteering

Name:	Date:
Address:	Phone Number(s):
E-mail:	Date of Birth:

How long have you lived at this address? _____ County: _____

If less than 7 years, please provide your previous address: _____

Volunteering Interests: _____

Days/Hours Available: _____

Date Available to Begin: _____

What strengths do you feel you have to assist you with volunteering? _____

Education and Training:

High School Graduate GED College Graduate Other: _____

Relevant Work/Volunteer Experience: *attach additional pages if necessary*

I certify the information contained in this application is true, correct and complete to the best of my ability.

Signature of Applicant:	Date:
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VOLUNTEER REFERENCES

Work Reference:	
Name:	How do you know this person?
Address:	E-mail:
Phone number:	

Volunteer Reference:	
Name:	How do you know this person?
Address:	E-mail:
Phone number:	

Personal Reference:	
Name:	How do you know this person?
Address:	E-mail:
Phone number:	

Personal Reference:	
Name:	How do you know this person?
Address:	E-mail:
Phone number:	

When completed, please return this form to Pillar & Vine.

P I L L A R & V I N E

CONSENT TO OBTAIN PERSONAL INFORMATION FORM

Applicant(s): _____ Date: ____/____/____

Address: _____

(Town/City) (County) (State) (Zip Code)

Phone: _____ Email: _____

-I /We, the undersigned have applied to for Foster Care Licensure with Pillar & Vine.
-I /We, hereby consent for Pillar & Vine to obtain information on me (us) and information on our minor children including, but not limited to:

- Background Checks
- City and County Records, including CPS
- Department of Motor Vehicles
- Sex Offender Registry
- References both personal and professional
- Local law enforcement
- General Correspondence

Applicant 1: _____

Applicant 2: _____