



## Volunteer/Employment Application

Application Date: \_\_\_\_\_

Position Applying for: \_\_\_\_\_

Name: \_\_\_\_\_

Current Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Current Employer: \_\_\_\_\_

Position/Title: \_\_\_\_\_ Dates Employed: \_\_\_\_\_

Groups, clubs, organizational memberships \_\_\_\_\_

Why do you want to volunteer with YBH?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What experiences have you had that may prepare you to work as a volunteer in the field of youth fitness and nutrition education with YBH?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Have you ever been convicted of a crime? \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

**\*\*You must provide a copy of your background check with this application.**

Do you have a driver's license? \_\_\_\_\_ Reliable transportation? \_\_\_\_\_

Driver's license number: \_\_\_\_\_ State: \_\_\_\_\_

**REFERENCES:** List three people who know you well and can attest to your character, skills and dependability. No family members or friends. One should be a current or former employer.

Name/Business	Relationship to you	Phone Number
1. _____		
2. _____		
3. _____		

**Please read the following carefully before signing this application:**

I understand that this is an application for and not a commitment or promise of a volunteer opportunity. I certify that the information provided on this application is true, correct and complete to the best of my knowledge. I certify that I have and will answer all questions to the best of my ability and that I have not and will not withhold any information that would unfavorably affect my application for a volunteer position.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Please mail/fax completed application to:**

The YBH Project, Inc.  
P.O. Box 181  
Albany, GA 31702-0181  
Phone: 229-869-6422  
Fax: 229-439-2481