



# britepaths

Formerly Our Daily Bread

## Volunteer Application Form

Date \_\_\_\_\_

Name \_\_\_\_\_ Home Phone \_\_\_\_\_

Address \_\_\_\_\_ Work Phone \_\_\_\_\_

City, State and Zip \_\_\_\_\_ Cell Phone \_\_\_\_\_

Email \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_

Name of employer/school \_\_\_\_\_

Educational Background (circle one)    High School    College    College Grad

List any technical/academic/job/language skills or interests you have: \_\_\_\_\_

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

Availability during office hours (M-F, 10am- 2pm): \_\_\_\_\_

\_\_\_\_\_

Length of service (eg.: 1 year, 6 months): \_\_\_\_\_

Type of volunteer projects:

Office Assistant

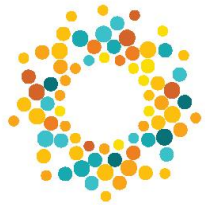
Food Program

Public relations

Adult Financial Mentoring

Fundraiser

Special Projects



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In completing this application for becoming a volunteer, I understand that I am not an agent or employee of Britepaths, and I further understand that this form is not an application for employment. I authorize release of information for Britepaths to obtain criminal and reference checks for the position(s) for which I am applying. I certify to the best of my ability that the information provided on this application is true and accurate. I also understand that misinformation knowingly provided here, and on subsequent volunteer information forms, is grounds for dismissal.

Britepaths would like to promote our programs and volunteering by using photographs of volunteers in action. Check here  if you do not wish for your photograph to be distributed in Britepaths publications.

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

Please list 3 references (other than family members)

1. Name \_\_\_\_\_ Phone \_\_\_\_\_  
Relationship \_\_\_\_\_
2. Name \_\_\_\_\_ Phone \_\_\_\_\_  
Relationship \_\_\_\_\_
3. Name \_\_\_\_\_ Phone \_\_\_\_\_  
Relationship \_\_\_\_\_

Please mail, fax or e-mail to:

Britepaths  
3959 Pender Dr, Ste 200, Fairfax, VA 22030  
703.273.8829 - Fax 703.273.7131 - [info@britepaths.org](mailto:info@britepaths.org)