

Volunteer Application Form

1. Personal Information

2.

3.

Name	Date of Birth	Sex
Address		
City	State	Zip
Phone	E-mail address	
Emergency Contact		
Phone		
Education and Training		
Educational Background 🛛 High school 🖓 College 🖓 College Grad		
Additional Training Are you conversational in a foreign language? □Yes □No If so, which language?		
Experience Name of Employer: Describe any work experience that might be applicable to Naomi mentoring:		
Drivers License? Yes 🗆 No 🗆		

4. Drivers License? Yes □ No □
Has your license ever been revoked? Yes □ No □
Have you ever been convicted of DUI? Yes □No □
Name of auto insurance company

5. Do you have any chronic or recurring health problems that we should consider when making a match with a potential client? (Explain)

- 6. Hobbies or special interests
- 7. Approximate number of hours each month you feel you can devote to this volunteer program: Length of Service:
- 8. Would you be able, if needed, to attend a Childbirth Preparation Class with a client and then be her childbirth coach? Yes \Box No \Box
- 9. Where did you learn about the Naomi Project?
- 10. **References:** *Please do not use a relative.*

Name	Title/relationship	
Address		
Phone		
Name	Title/relationship	
Address		
Phone		

In completing this application for becoming a volunteer, I understand that I am not an agent or employee of Britepaths or the Naomi Project, 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.

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

Date _____ Signature _____

Please return the completed form to: Naomi Project, a program at Britepaths, 4080 Chain Bridge Road, Fairfax, VA 22030 jberes@britepaths.org Fax: 703-273-7131