

Dyeann's House, Inc Volunteer Application

Thank you for your interest in volunteering for Dyeann's House! This application will be kept on file for one year. Please know that volunteers are accepted based on the needs of the house, so if we do not call you right away, we may be in need of your specific skills at a later time.

Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Please fill in the times that you are available to volunteer:

Monday: _____

Tuesday: _____

Wednesday: _____

Thursday: _____

Friday: _____

Saturday: _____

Sunday: _____

Would you be able to be "on call" (be able to volunteer with short notice)? Yes No

Are you CPR certified? Yes No Are you First Aid certified? Yes No

Do you have a valid driver's license? Yes No

What skills or talents do you have that you would like to share with the children staying at Dyeann's House?

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This interest check list will allow us to match you with a task that best suits your interests and abilities. Please number the following in order of preference:

- _____ Work directly with children ages 0-5
- _____ Work directly with children ages 6-11
- _____ Work directly with children ages 12 and over
- _____ Hand out literature to doctor's offices and businesses
- _____ Help plan fundraisers and other events
- _____ Work at fundraisers and other events

If you are chosen to be a Dyeann's House volunteer, would you consent to a background check? Yes No

Are you currently employed? If so, where? Yes _____ No

Please list two people that know you well and can speak to your character:

Name	How do you know this person?	Phone Number
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Thank you again for your interest in helping Dyeann's House!

Dyeann's House
The Home Away From Home

“We Serve”