

## **VOLUNTEER/INTERN APPLICATION**

Please return this application by email, fax or mail

965 Tucker Rd. Hood River, OR 97031 1113 Kelly Ave. The Dalles, OR. 97058 Tel: 541.386.6665 Fax: 541.386.5440 Email: info@nextdoorinc.org www.nextdoorinc.org

Date:	

PERSONAL INFORMATION	:			
Last Name:	First Name:	Middle Initial:		
Physical Address:	City:	State: Zip:		
Mailing Address:	City:	State: Zip:		
Email:	Phone:			
EDUCATION:				
High School:	#	Years Completed:		
College:	#	ears Completed:		
Major(s):	D	egree:		
Grad School:	Do	egree:		
<b>WORK &amp; VOLUNTEER EXPE</b>	ERIENCE: Provide 3 references	s from past work or volunteer experience.		
Organization:		Dates:		
Position Held:		Main Duties:		
Contact Name:				
Phone/Email:		-		
Organization:		Dates:		
Position Held:		Main Duties:		
Contact Name:		-		
Phone/Email:		.		
Organization:		Dates:		
Position Held:		Main Duties:		
Contact Name:		.		
•				
<b>EMERGENCY CONTACT:</b>				
Name:	Relationshi	ip:		
Phone:	Fmail:			

DAYS & HO	DURS: When	can you be availa	ıble?				
Sun	Mon	Tues	Wed	Thur	Fri	Sat	
AM	AM	AM	AM	AM	AM	AM	
PM	PM	PM	PM	PM	PM	PM	
SKILLS: PIG	ease indicate t	ne skills and inter	rests you feel co	uld benefit Ir	ie Next Door Prog	rams	
Bilingual:_		Per	forming Arts		Health Educati	on	
Computer	Skills		otography		Nutrition Counseling		
Graphic D	esign Skills	Art	s and Crafts	_	 Counseling		
Clerical Sk	kills	Sewing Teaching One to One					
Video Prod	duction						
Public Rela	ations	Woodworking Mentoring a child (ages 6-1					
 Fundraisin	ng	Handyman/Woman Mentoring a teen (ages 13-					
 Writing/Ed	-		ture Activities	_	_	( )	
 Special Ev	_				Other:		
Valid Drive		Yes No		_			
		APPLI	CATION FORM	WAIVER			
I authoriz	ze investigatio	n of all statement	s contained in t	his application	n. I understand t	hat the	
					at any time with		
previous						,	
•		s a volunteer or i	ntern position a	nd that it is te	rminable at will f	or any reason	
by either		o a volunteer of h	nicern posicion di	ina chac ic is co	irininable at will r	or arry reason	
5, 6,6,76,	parcy.						
<b>D</b> :				<b>.</b> .			
Print Name:				Date:			
<b>.</b>							
Signature:							
	(Parent or G	uardian must fil	l out the follow	wing if above	e person is unde	er 18)	
D							
Parent/				Date	<b>e:</b>		
Guardian's							
Name:							
Signature:							

The Next Door is an equal employment and volunteer opportunity employer. We adhere to a policy of making employment and volunteer decisions without regard to race, color, religion, gender, sexual orientation, national origin, citizenship, age, or disability. We assure you that your employment or volunteer opportunity with The Next Door depends solely on your qualifications.

We thank you for completing this application and for your interest in serving our community as a volunteer!