



VOLUNTEER APPLICATION

Kainos Home & Training Center

3631 Jefferson Avenue
 Redwood City, CA 94062-3148
 Office: 650-363-2423 Fax: 650-363-2082

If you plan to volunteer for more than 2 days, please complete page 2

VOLUNTEER

Personal Information

Last Name	First Name	Middle Name	Today's Date
Street Address	City	State	Zip Code
Home: (____) _____ - _____		Are you 18 or over? Yes ___ No ___	
Cell: (____) _____ - _____		Please list your availability below: _____ _____ _____	
Email: _____			
<u>Emergency Contact:</u>			
Name: _____			
Relationship (optional): _____		Total number of hours available each week:	
Phone: (____) _____ - _____			
Type of Position Volunteering For: One-time ___ Mentor ___ Ongoing ___ Other ___			
How did you hear about Kainos?: _____			
Have you ever been convicted of a crime? Yes ___ No ___		Are you currently employed? Yes ___ No ___	

References

Please list names of supervisors, managers, or others who can comment directly on your work abilities:

Name	Address	Phone #	Relationship/Occupation	Years Known

I certify that the information contained in this volunteer application is correct to the best of my knowledge.

Applicant Signature

Date

Parent or Guardian of Applicant (if under age 18)

Date

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Education (Optional)			
Name and Location	# Years Completed	Major Area of Study	Degree/Diploma

Employment Information			<input type="checkbox"/> N/A
Employer:	Dates Employed: From _____ To _____	Job Title:	
Address:			
Job Duties:			

FOR VOLUNTEER POSITIONS WITH DIRECT CONTACT WITH CLIENTS

Do you have a valid California Driver's License at this time? ____ Class A ____ Class B ____ Class C ____

To your knowledge, do you have more than 2 violations on your driving record? ____

Please list any volunteer experience, job-related organizations, clubs, personal hobbies or other related interests:

Organization	Position/Major Responsibility	Dates of service (from/to):
_____	_____	_____
_____	_____	_____
_____	_____	_____

Why do you want to serve in this position? How do you hope to benefit from your volunteering?

Please list qualifications, skills or talents that you bring to this position (musician, event planner, writer, etc):

I certify that the information contained in this volunteer application is correct to the best of my knowledge.

Applicant Signature

Date

Parent or Guardian of Applicant (if under age 18)

Date

Applications can be submitted in three ways:

- Drop it off at our office: 3631 Jefferson Ave, Redwood City
- Fax it to: 650-363-2082
- Email it to: meghan.sartain@kainosusa.org, Subject: Volunteering