

## **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								
<b>Personal Info</b>	ormation							
Last Name	First Name	Middle N	Today's D	ate				
Street Address	City	State	Zip Code					
Home: (	_)	Are you 18 or over?	Yes No					
		Please list your availability below:						
Email:								
<u>En</u>	nergency Contact:							
Name:		Total number of hours available each week:						
	nal):							
Type of Position Vo	olunteering For:	Mentor Ongoing	Other					
How did you hear a	bout Kainos?:	<u> </u>						
Have you ever been	convicted of a crime? Yes	No Are you curr	rently employed? Yes No	)				
References			no can comment directly on you	r work abilities:				
Name	Address	Phone #	Relationship/Occupation	Years Known				
I certify that the info	rmation contained in this volunteer	r application is correct to the	he best of my knowledge.					
Applicant Signature		Date						
Parent or Guardian of Applicant (if under age 18)		_						

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

<b>Education</b> (Optional)							
Name and Location		# Years Completed	Major Area of Study		Degree/Diploma		
<b>Employment Informatio</b>	n						
		mlorrods		Job Title:			
Employer:	Dates Employed: From To			Job Title:			
Address:	J						
Job Duties:							
FOR VOLUNTEER POSITIONS V	VITH DIRE	CT CONTACT WITH	CLIENTS				
Do you have a valid California Dri				Class B	Class C		
To your knowledge, do you have r					Class C		
To your knowledge, do you have I	noie than 2	violations on your diff	ing record	·			
Please list any volunteer experience	ce, job-relate	ed organizations, clubs	, personal l	nobbies or othe	er related interests:		
0	Destates	/M D		Data a Caracia	(5, // - )		
Organization	Position	Major Responsibility		Dates of service	e (Irom/to):		
	<del></del>						
***			C* . C	4			
Why do you want to serve in this p	position? He	ow do you hope to ben	efit from y	our volunteeri	ing?		
Please list qualifications, skills or	talents that v	you bring to this position	on (musici:	an event plant	ner writer etc):		
rease list qualifications, skills of	taronts that j	ou oring to this positi	on (masien	an, event plan	ici, wiici, cic).		
I certify that the information contained	d in this volu	nteer application is corre	ct to the bes	t of my knowle	dge.		
 Applicant Signature				 Date			
турнеши ықпшиге				Duit			
Parent or Guardian of Applicant (if under		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