

## VOLUNTEER APPLICATION

Date of Application \_\_\_\_\_

### PERSONAL INFORMATION

Name (First) \_\_\_\_\_ (Last) \_\_\_\_\_ (Middle) \_\_\_\_\_  
Phone \_\_\_\_\_ Email \_\_\_\_\_

How do you identify: Lesbian \_\_\_\_ Gay \_\_\_\_ Bisexual \_\_\_\_ Transgender \_\_\_\_ Queer \_\_\_\_  
Intersex \_\_\_\_ Ally \_\_\_\_ Non-Binary \_\_\_\_ Other \_\_\_\_  
Pronoun (he, she, they, etc) \_\_\_\_\_

Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_ State \_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_  
Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_ Relationship \_\_\_\_  
Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_ Relationship \_\_\_\_

Pet \_\_\_\_\_ Identity \_\_\_\_\_ Age \_\_\_\_\_

### EDUCATION & TRAINING

High School \_\_\_\_\_ Diploma \_\_\_\_ Certificate \_\_\_\_ Year \_\_\_\_  
College \_\_\_\_\_ Major \_\_\_\_\_ Degree \_\_\_\_ Year \_\_\_\_  
License \_\_\_\_\_  
Military Service \_\_\_\_ Branch \_\_\_\_ Years of Service \_\_\_\_ Classification \_\_\_\_\_

### AREAS of Interest/Skills:

Hobbies, Organizational Memberships, Recreation \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### EMPLOYMENT

Current \_\_\_\_\_ Address \_\_\_\_\_ Title \_\_\_\_\_  
Previous \_\_\_\_\_ Address \_\_\_\_\_ Title \_\_\_\_\_  
Retired/Unemployed \_\_\_\_\_ Since \_\_\_\_\_

I would like to apply to the Lavender Seniors Volunteer Program in the following areas:

Friendly Visitor: Visits/Calls \_\_\_\_ Transportation \_\_\_\_ Errands \_\_\_\_ Friendly Visitor Internship Program \_\_\_\_  
Administrative Support \_\_\_\_  
Lunch Bunch (3<sup>rd</sup> Friday) \_\_\_\_ Rainbow Lunch \_\_\_\_ (2<sup>nd</sup> Saturday) Event Planning \_\_\_\_ Communications \_\_\_\_  
Fundraising \_\_\_\_ Newsletter \_\_\_\_ Speaker Panel \_\_\_\_ Grant Writing \_\_\_\_ Marketing \_\_\_\_ Clerical \_\_\_\_  
Newsletter Support \_\_\_\_ Grant Writing \_\_\_\_ Special Events \_\_\_\_ Training \_\_\_\_ Outreach \_\_\_\_

Previous volunteer experience \_\_\_\_\_

### What is your reason for volunteering?

Meeting LGBTQ community members \_\_\_\_ Meeting senior community members \_\_\_\_ Volunteer experience \_\_\_\_  
Acquiring volunteer hours \_\_\_\_ Self-fulfillment \_\_\_\_ Personal Support \_\_\_\_



## PERMISSION FOR BACKGROUND CHECK

I, \_\_\_\_\_, hereby authorize Lavender Seniors of the East Bay and/or its agents to make an independent investigation of my background, past employment, driver's records, criminal or police records, including those maintained by both public and private organization, and all public records for the purpose of both confirming the information contained on my Application and/or obtaining other information which may be material to my qualification or

work now and, if applicable, during the tenure of my time with Lavender Seniors of the East Bay.

I release Lavender Seniors of the East Bay and/or its agents and any persons or entity, which provides information pursuant to this authorization, from any and all liabilities, claims or lawsuits in regard to the information obtained from any and all of the above referenced sources used.

The following is my true and complete legal name. All information written in this document by me is true and correct to the best of my knowledge.

Full Name (Printed)	Maiden Name or Other Names Used
1) _____	
Present Address	City
	State
	Zip
(I have resided here during the following dates: ____/____/____ - [present])	
2) _____	
Previous Address	City
	State
	Zip
(I have resided here during the following dates: ____/____/____ - ____/____/____)	
3) _____	
Previous Address	City
	State
	Zip
(I have resided here during the following dates: ____/____/____ - ____/____/____)	

Complete number 3 if you have lived less than 10 years combined at 1<sup>st</sup> and 2<sup>nd</sup> addresses above

Date of Birth	Social Security #	Driver's License #	State
____/____/____	____-____-____		

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Lavender Seniors of the East Bay is an Equal Opportunity Employer, and does not discriminate on the basis of race, color, religion, creed, national origin, age, disability, gender identity, HIV/AIDS status, marital status, parental status, religion, sexual orientation, political beliefs, age or any characteristics category, or class protected by state or federal law.

**CONFIDENTIALITY STATEMENT**

All confidential information pertaining to the Lavender Seniors of the East Bay, Friendly Visitors Program clients shall be held in absolute privacy and shall not be divulged under any circumstances. This includes all pertinent details of any classification to unauthorized individuals, including information regarding senior’s name, status or home address.

It is further agreed, not to market or otherwise make public any detail pertaining to the senior in such manner as to obscurely identify the client. This is critical to the Lavender Seniors process and the client category we serve.

**OATH OF CONFIDENTIALITY**

I, \_\_\_\_\_, agree to hold confidential all information pertaining to Lavender Seniors of the East Bay Friendly Visitor Program participants. I agree not to divulge any information to any unauthorized individuals regarding client status or home address. I further agree not to publish or otherwise make public any information regarding Lavender Seniors participants in such a way as to identify the recipient of the Friendly Visitor Program.

\_\_\_\_\_  
Signature of Volunteer

\_\_\_\_\_  
Date of Signature