



Volunteer Application

First Name: _____ Last Name: _____ Middle Initial: _____

Address: _____ City: _____ State: _____ Zip: _____

Date of Birth: Month _____ Day: _____ Year: _____ Gender: Male Female

(Date of birth and gender will *only* be used for conducting a background check which is mandatory for all applicants.)

Primary Phone: _____ Best Time to Reach You: Morning

Email Address: _____

Emergency Contact Name: _____

Emergency Contact Phone: _____

Are you currently employed? Full-Time Part-Time Not Employed

Employer: _____

Have you volunteered for SCORES before? YES NO

Interest(s): Soccer Photography Marketing/PR
 Creative Writing Equipment Drives General Office Help
 Community Service Internships Board of Directors
 Special Events

Availability: SCORES programming runs immediately afterschool between the hours of 3-5:30pm
Which days are you available to volunteer during these hours?

Monday Tuesday Wednesday Thursday Friday

Are you volunteering to fulfill a school or other requirement? YES NO

If yes, please explain requirements: _____



Volunteer Application

Please read the following carefully before signing this application:

I understand that this is an application for and not a commitment or promise of volunteer/intern opportunity. I certify that I have and will provide information throughout the selection process, including on this application for a volunteer/intern position that is true, correct, and complete to the best of my knowledge and that I have not and will not withhold any information that would unfavorably affect my application for a volunteer/intern position. I understand that information contained on my application will be verified by America SCORES Milwaukee. I understand that a background check will be run before I begin my volunteer/intern service with America SCORES Milwaukee. I understand that misrepresentations or omissions may be cause for my immediate rejection as an applicant for a position with America SCORES Milwaukee or my termination as a volunteer/intern.

Signature: _____

Date: _____

Parental Permission (If under 18 years of age)

This section is required for any person under the age of 18 in order to be considered as a volunteer/intern with America SCORES Milwaukee.

I, _____, agree that my child _____
PRINT NAME OF PARENT OR GUARDIAN PRINT NAME OF MINOR

may participate in the America SCORES Milwaukee Volunteer/Intern Program, I have read and understood all the volunteer/intern information provided. I will be responsible for the transportation of my teen to and from volunteer/intern jobs and events.

Signature: _____

Date: _____