

volunteer application form

YWCA Domestic Violence Intervention & Prevention Program

YWCA DVIPP, 605 N. 6th Street, Lafayette IN 47901
765-423-1118

Name _____
First Middle Initial Last

Address _____
Street City State ZIP

Home Phone _____ Work Phone _____ E-mail _____

Are you 18 years of age or older? _____

List any work or volunteer experiences you have had in the social service field (where, when, how long, duties, etc.)

Briefly describe any crisis you have had in the last six months. _____

Briefly describe how you handled this crisis. _____

Do you have a support system? Describe it. _____

-OVER-

**eliminating racism
empowering women**
ywca

List any topics or issues that YOU feel very strongly about (abortion, homosexuality, religion, etc.) _____

Have you ever received services from our program? If so, what services? _____

Please list three personal references:

Name	Address	Phone Number
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I am interested in:

- On call as an in-town driver for women and children needing rides. (Need valid driver's license)
- On call to drive to nearby cities. (Need valid driver's license)
- On call to help with monthly cleaning or yard work (to be scheduled as needed).
- On call to help families move.
- Monday, Tuesday, Wednesday, Thursday, and Sunday evening childcare. (Please circle day.)
- Special projects with kids. (Example: Weekend or holiday children's activities)
- Pick up donations or furniture. (Need valid driver's license)
- Work in the shelter assisting staff.
- Office help 8:00 a.m. to 5:00 p.m. Monday through Friday.
- Outreach to Lafayette area and surrounding counties.

Signature of applicant: _____

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Interviewed by: _____

Date: _____