

Education	
Circle Highest Grade Completed 8 9 10 11 12 13 14 15 16	Scholastic Honors Received

	Name of School	Location (City, State)	Courses Taken	Completed	Type of Degree or Certificate Received
High School				<input type="checkbox"/> Yes <input type="checkbox"/> No	
College				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Vocational				<input type="checkbox"/> Yes <input type="checkbox"/> No	
Professional Education				<input type="checkbox"/> Yes <input type="checkbox"/> No	

Extracurricular Activities While in School	
Member of Professional Organizations	
Honors Received: Volunteer, Community Service or Other Qualifications & Skills you have which you feel are related to the Volunteer Position	
Objectives: Why would you like to volunteer at Horizons, Inc.?	

Professional Licenses and/or Certifications			
Type	Organization or State Issued	Date Issued	Number
Type	Organization or State Issued	Date Issued	Number
Type	Organization or State Issued	Date Issued	Number

Please list three references who are not family members and who have known you for a year or more:

<u>Name</u>	<u>Phone #</u>	<u>How do you know this person?</u>
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

What type of commitment would you like to make? (Check all that apply)

1 time only
 3 months
 6 months
 1 year
 once per week
 once per month
 as needed
 other: _____

Please indicate below the type(s) of volunteer work which you would like to do for Horizons, Inc.:

- Fundraising Volunteer** – Help sell tickets to a Horizons fundraiser.
 - Office Volunteer** – Help with general administrative duties in the Horizons office.
 - Special Events Volunteer** – Help out at a fundraising event or social activity with Horizons clients.
- ⇒ What skills/talents/hobbies would you like to share with us?
-

Have you ever been convicted of a crime? Yes No

⇒ If yes, for what, when & where?

**Conviction of a criminal offense will not necessarily preclude your volunteer work.*

Have you ever been disciplined, discharged or asked to resign? Yes No

⇒ If yes, please explain.

Employment & Volunteer History References			
Present & Former Employers	Dates Employed	Employment or Volunteer Service	Position & Duties
Name _____ Address _____ City/State/Zip _____ Supervisor _____ Phone _____	From _____ To _____		
Name _____ Address _____ City/State/Zip _____ Supervisor _____ Phone _____	From _____ To _____		
Name _____ Address _____ City/State/Zip _____ Supervisor _____ Phone _____	From _____ To _____		
Name _____ Address _____ City/State/Zip _____ Supervisor _____ Phone _____	From _____ To _____		
No permission to contact employer(s): _____			

