



605 S. Patterson Boulevard
Dayton, OH 45402
Volunteer@DaybreakDayton.org
937-395-4600

Volunteer Application

Applicant Information

| | |
|--|---|
| Name (Last, First, Middle Initial) | |
| Home Address (Number & Street, City, State, ZIP) | |
| Phone Number & Phone Type <input type="checkbox"/> Cell <input type="checkbox"/> Home <input type="checkbox"/> Office | Email Address |
| Are you over 18 years old? <input type="checkbox"/> No <input type="checkbox"/> Yes | Are you related to a former or current Daybreak employee or board member? If yes, please tell us their name(s) and your relationship to them. <input type="checkbox"/> No <input type="checkbox"/> Yes |
| Have you ever worked for or received services from Daybreak? If yes, give dates and connection. <input type="checkbox"/> No <input type="checkbox"/> Yes | |

Available Volunteer Opportunities (Check all that interest you. See website for more info.)

- Assist with youth activities (M–F) Administrative support (M–F)

Applicant Interests & Experience (you may add pages)

| |
|---|
| Please tell us why you're interested in volunteering at Daybreak. |
| Briefly describe experience you've had, either as an employee or volunteer, working with children, teens, or young adults who were in crisis or at-risk. |
| What job or volunteer experience have you had that relates to the volunteer position you're interested in? |
| What knowledge, skills, or areas of expertise would you be willing to use as part of your volunteer experience? For example: computer software, art, music, crafts, cooking, etc. |
| Please share any additional information you want us to know. |

Availability

I'm interested in volunteering: Once a week Once a month As needed Other _____

Tell us the days and times you could be available.

| | Monday | Tuesday | Wednesday | Thursday | Friday |
|-----------|--------|---------|-----------|----------|--------|
| Morning | | | | | |
| Afternoon | | | | | |
| Evening | | | | | |

Applicant Statement

I confirm that all information I've supplied in this volunteer application is true, complete, and accurate. I understand that by submitting this application, I authorize Daybreak to make inquiries regarding my suitability as a volunteer. I understand that submitting this application does not guarantee an appointment into Daybreak's volunteer program. I understand that Daybreak does not unlawfully discriminate and that no question on this application is used for the purpose of limiting or excusing any applicant from consideration on a basis prohibited by applicable local, state, or federal laws. I agree to comply with and be bound by Daybreak's safety and health rules and regulations, rules of conduct, and policies and procedures.

Applicant Signature

Date

↓ ↓ ↓ ↓ ↓ For Office Use Only ↓ ↓ ↓ ↓ ↓

Birthdate _____

Start Date _____

Raiser's ID _____

Emergency Contact Information

| | | |
|-----------------|--|--|
| Contact #1 Name | Phone #1 <input type="checkbox"/> Cell <input type="checkbox"/> Home <input type="checkbox"/> Office | Phone #2 <input type="checkbox"/> Cell <input type="checkbox"/> Home <input type="checkbox"/> Office |
| Home Address | | Relationship |
| | | |
| Contact #2 Name | Phone #1 <input type="checkbox"/> Cell <input type="checkbox"/> Home <input type="checkbox"/> Office | Phone #2 <input type="checkbox"/> Cell <input type="checkbox"/> Home <input type="checkbox"/> Office |
| Home Address | | Relationship |

- Background check agreement
- Background check results
- Fingerprint check results
- Reference ROI
- Required references received 1 2 3

- Confidentiality agreement signed
- Code of ethics acknowledgement
- Volunteer handbook acknowledgement
- Service description