



**Exploring Joara Foundation**

PO Box 296, Morganton, NC 28680

ExploringJoara.org

**Volunteer Application**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Zip: \_\_\_\_\_

Home Ph.#: \_\_\_\_\_ Work Ph.# : \_\_\_\_\_ Cell Ph.#: \_\_\_\_\_

Email Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

**Please Circle Preferred Opportunity:**

EJF Ambassador      Events and Prog.      Office Support      Maint. and Beautif.      Special Skill

**Emergency Contact Information**

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Any health problems or allergies that you feel are important to mention?      Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, explain: \_\_\_\_\_

**Education/Experience/Interests:**

Occupational Background: \_\_\_\_\_

Educational Background: \_\_\_\_\_

Workshops and other trainings: \_\_\_\_\_

---

Hobbies, skills, and other interests: \_\_\_\_\_

---

Other volunteer experience: \_\_\_\_\_

---

**Availability:**

I am interested in volunteering during the following times:

Sunday  Hours Available: \_\_\_\_\_

Monday  Hours Available: \_\_\_\_\_

Tuesday  Hours Available: \_\_\_\_\_

Wednesday  Hours Available: \_\_\_\_\_

Thursday  Hours Available: \_\_\_\_\_

Friday  Hours Available: \_\_\_\_\_

Saturday  Hours Available: \_\_\_\_\_

**I understand that as an Exploring Joara Foundation Volunteer, I represent Exploring Joara Foundation.\***

---

(signature)

(date)

**For volunteers under 18 years of age\*\*:**

---

(Minor's signature)

(date)

---

(Parent/Guardian signature)

(date)

\* Any volunteer who chooses to work with children will undergo a complete criminal background check.

\*\* Any volunteer under 18 must provide a written recommendation by a teacher **and** parent to volunteer with the Exploring Joara Foundation and be at least 16 years old or older