

## Friend to Friend America - 2020 Volunteer Application

**Instructions:** Please fill out and save this PDF form to your computer. Attach and email the completed form to volunteer@ffa.org. You may also print and send the form to the address listed at the bottom of the form.

### Applicant Information

Name \_\_\_\_\_  
First Middle Last

Phone \_\_\_\_\_ Email: \_\_\_\_\_

Address \_\_\_\_\_  
Number / Street

\_\_\_\_\_ City / State Zip

Date of Birth \_\_\_\_\_ Gender M F

Occupation \_\_\_\_\_

Employer Name \_\_\_\_\_

Work Phone \_\_\_\_\_ OK to Call at Work? Yes No

### Emergency Contact Information

Name \_\_\_\_\_ Email \_\_\_\_\_

Relationship \_\_\_\_\_ Phone \_\_\_\_\_

### References

Please list two references (other than family) with contact information. Friend to Friend America prefers references that are located in the state of Washington.

#### Reference #1

Name \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_

Relationship \_\_\_\_\_ Phone \_\_\_\_\_

#### Reference #2

Name \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_

Relationship \_\_\_\_\_ Phone \_\_\_\_\_

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### Tell Us a Little More About You

Languages you speak other than English? \_\_\_\_\_

Describe any other volunteer work you have performed:

\_\_\_\_\_  
\_\_\_\_\_

Check any interests and/or skills that you have:

Reading                      Movies                      Animals                      Card Games

History                      Cooking                      Crafts                      Gardening

Photography                      Sewing                      Sports                      Music

Other \_\_\_\_\_

Would you to prefer to visit                      Man                      Woman                      No Preference

Do you have a preference for the facility where you would like to visit with a new friend?

Do you have a preference for when you would volunteer?

Weekdays                      Weekends                      Mornings                      Evenings

Do you have any interest in volunteering in the office doing administrative tasks? In addition to being a friendly visitor with a resident, would you be interested in helping in the office with fundraising or special events? (Please describe)

\_\_\_\_\_  
\_\_\_\_\_

How did you hear about Friend to Friend America?

VolunteerMatch.com                      FTFA.org                      Friend / Colleague

Other \_\_\_\_\_

Friend to Friend America will not discriminate against any individual because of race, age, sexual orientation or religious views. All volunteers are subject to a background check. Your signature below gives Friend to Friend America permission to perform a background check as required by the Child/Adult Abuse Information Act RCW 43.43.830 through 43.43.845.

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_

## Friend to Friend America - Criminal History Disclosure

### Policy

Please understand due to the nature of those we serve, all prospective Friend to Friend America volunteers will be subject to a criminal history background check. Friend to Friend America will not accept volunteers who have committed crimes against children and/or vulnerable adults. In addition, we cannot provide court ordered volunteer opportunities.

In order to be considered for a volunteer position, you must be able to answer "No" to all of the following questions.

#### Have you ever:

- |     |    |  |
|-----|----|--|
| Yes | No | been convicted of any crime against children or other persons?   |
| Yes | No | been convicted of crimes relating to financial exploitation if the victim was a vulnerable adult?  |
| Yes | No | been convicted of crimes related to drugs as defined in RCW 43.43.830?   |
| Yes | No | been found in any dependency action under RCW 13.34.040 to have sexually assaulted or exploited any minor or to have physically abused any minor?  |
| Yes | No | been found by a court in a domestic relations proceeding under Title 26 RCW to have sexually abused or exploited any minor or to have physically abused any minor?   |
| Yes | No | been found in any disciplinary board final decision to have sexually or physically abused or exploited any minor or developmentally disabled person or to have abused or financially exploited any vulnerable adult? |
| Yes | No | been found by a court in a protection proceeding under chapter 74.34 RCW, to have abused or financially exploited a vulnerable adult?  |

Once this application is processed, you will receive a link to the DSHS website to complete your background check.