



Loaves, Fishes & Computers

Volunteer Applications Form

Please fill in all of the requested information and sign where indicated

938 S. Main St.
Salinas, CA
93901
Tel: (831)
393-9260

Personal Information						
Last Name:		First Name:		MI:	Preferred:	DOB:
Address:				City:	State:	Zip:
E-Mail:		Cell #:		Home #:		
What race do you identify with?		Do you consider yourself low-income? <input type="checkbox"/> Yes <input type="checkbox"/> No		What is the best way to reach you?		

Interests / Skills					
<i>How would you like to help us out?</i>					
<input type="checkbox"/> Computer Refurbishing <input type="checkbox"/> Tech Support <input type="checkbox"/> Front Desk <input type="checkbox"/> Cleaning & Testing Equipment <input type="checkbox"/> Sales/ Marketing <input type="checkbox"/> Volunteer Recruiting/Coordinating <input type="checkbox"/> Web Design <input type="checkbox"/> Custodial <input type="checkbox"/> Grant Writing/Fundraising <input type="checkbox"/> Other _____					
<i>What are some of your skills?</i>					
<input type="checkbox"/> Windows 7/10 <input type="checkbox"/> Phone/ Tablet Repair <input type="checkbox"/> Linux/Unix <input type="checkbox"/> Mac <input type="checkbox"/> Grant Writing/Fundraising <input type="checkbox"/> Networking <input type="checkbox"/> Desktop PC Repair <input type="checkbox"/> Laptop Repair <input type="checkbox"/> Clerical <input type="checkbox"/> Customer Service <input type="checkbox"/> Bookkeeping <input type="checkbox"/> Event Coordinating <input type="checkbox"/> Other _____ <input type="checkbox"/> Languages Spoken _____					
Certifications:			How did you hear about us?		
Schedule	Tuesday	Wednesday	Thursday	Friday	Saturday
LFC is open 9:30am-5PM (Tu-Sat)	<input type="checkbox"/> 9:30am-1pm <input type="checkbox"/> 11 am-2pm <input type="checkbox"/> 2 pm-5pm <input type="checkbox"/> Other _____	<input type="checkbox"/> 9:30am-1pm <input type="checkbox"/> 11 am-2pm <input type="checkbox"/> 2 pm-5pm <input type="checkbox"/> Other _____	<input type="checkbox"/> 9:30am-1pm <input type="checkbox"/> 11 am-2pm <input type="checkbox"/> 2 pm-5pm <input type="checkbox"/> Other _____	<input type="checkbox"/> 9:30am-1pm <input type="checkbox"/> 11 am-2pm <input type="checkbox"/> 2 pm-5pm <input type="checkbox"/> Other _____	<input type="checkbox"/> 9:30am-1pm <input type="checkbox"/> 11 am-2pm <input type="checkbox"/> 2 pm-5pm <input type="checkbox"/> Other _____

Emergency Contact Information					
Last Name:		First Name:		Relationship:	Primary Phone:
Address:				City:	State: Zip:
Allergies / Limitations:					

<p>By signing below, I certify that the information provided is true and correct. Any falsified information will be grounds for dismissal as a volunteer. I have read and consent to the attached Waiver and Release of Liability.</p> <p>Signature _____ Date _____</p> <p>Parent's Signature (if under 18) _____ Date _____</p>	<p>For VC use only</p> <p><input type="checkbox"/> Interview Date: _____</p> <p><input type="checkbox"/> Volunteer Handbook</p> <p><input type="checkbox"/> Copy Of ID</p> <p><input type="checkbox"/> Humanity Setup</p> <p><input type="checkbox"/> Orientation</p> <p><input type="checkbox"/> Start Position: _____</p>
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Current Employer			
Company:	<input type="checkbox"/> Self-Employed <input type="checkbox"/> Unemployed	Phone #:	Supervisor's Name:
Job Responsibilities:			Dates of Employment:
Education			
High School:			
College:		Major:	
What is the highest level of education completed?			
Previous Volunteer Experience			
Organization:	Phone #:	Coordinator's Name:	
Volunteer Responsibilities:			Dates:
Organization:	Phone #:	Coordinator's Name:	
Volunteer Responsibilities:			Dates:
Why do you want to volunteer with Loaves, Fishes & Computers?			
<hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/> <hr/>			
May we contact your previous employers/volunteer coordinators? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Have you ever applied to / volunteered with Loaves, Fishes & Computers before? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please explain (include date): _____			
Do you have any friends, relatives, or acquaintances working for Loaves, Fishes & Computers? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, state name & relationship: _____			
Have you ever been convicted of a criminal offense (felony or misdemeanor)? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please describe the crime - state nature of the crime(s), when and where convicted and disposition of the case. _____			
<p><i>(Note: No applicant will be denied solely on the grounds of conviction of a criminal offense. The date of the offense, the nature of the offense, including any significant details that affect the description of the event, and the surrounding circumstances and the relevance of the offense to the position(s) applied for may, however, be considered.)</i></p>			



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Waiver and Release of Liability

Waiver and Release of Liability: In connection with my voluntary involvement in activities undertaken for, and / or with the participation and support Loaves, Fishes & Computers, Inc., I, the undersigned, hereby agree, for myself, my heirs, executors, administrators or assigns, to release and discharge Loaves, Fishes & Computers, Inc., its officers and directors, members, partners, funders, employees, agents, and volunteers (Releasees) from all claims, demands, and actions from injuries sustained to my person and/or property as a result of my involvement in such activities, whether or not resulting from negligence.

I agree to release and hold Loaves, Fishes & Computers, Inc. and its Releasees harmless from any cause or action, claims or suit arising there from. I hereby attest that my attendance and involvement in such activities is voluntary, that I am participating at my own risk and that I have read the foregoing terms and conditions of this release. I understand that I will receive no payment for my services at Loaves, Fishes & Computers, Inc. I agree that I will perform activities that I am comfortable performing and will follow all instructions. I also grant full permission for Loaves, Fishes & Computers, Inc. and their Releasees, to forever use photographs, videos, audios or quotations from me in legitimate accounts and promotion of Loaves, Fishes & Computers, Inc. activities, without identification of me by name (or with name, at your discretion), and without compensation.

I have read the above release and state that I have understood it and that I am voluntarily signing it without any inducement or representation from any member of the staff. I understand that I will not be held liable for any action, wrongdoing, or unintended damage to property of

Loaves, Fishes & Computers, Inc. I further understand that I am free to stop all volunteering at my discretion and that I can be dismissed of my volunteering opportunity at any time for any reason or for no reason whatsoever.

Initial

Date

Parents/Guardians Initials (if under 18)