

Fox Island Alliance

7324 Yohne Road
Fort Wayne, IN 46809-9744



Volunteer Application

Name (first middle and last):

Address (street, city, state, zip):

Telephone: _____

Email: _____

What kind of volunteer activity are you interested in? _____

Why do you want to volunteer for Fox Island Alliance? _____

Please list recent work and volunteer activities: _____

Personal references (two people not related to you). Please include name, address, phone number, and email: _____

Have you ever been convicted of a crime?

*I certify that this application was completed by me, and that all information is true and complete to the best of my knowledge.

*I authorize investigation of all statements contained in this application as may be necessary in arriving at a decision. In completing this application, I understand that information may be obtained through interviews with references. This inquiry may include information as to my character, general reputation, and personal characteristics. I consent to this review and to the consideration of any statements of references that are given in response to the inquiry. I consent and understand that Fox Island Alliance, Inc. will conduct a background check as the volunteer positions with Fox Island Alliance, Inc. may involve interaction with children.

*I hereby release all parties, including Fox Island Alliance, Inc. and references, from liability for any injury or damage that may result from their furnishing information concerning me or any action Fox Island Alliance, Inc. takes on the basis of such information.

*I further grant permission to Fox Island Alliance, Inc. and/or agents authorized by them to use any photographs, videotapes, motion pictures, recordings, or any other record of me performing my volunteer duties for any purpose.

*Your name in this box acts as your signature for the VOLUNTEER APPLICANT'S STATEMENT (signature line or name entry box for online use).

Signature

Date

Submission instructions and next steps:

- Once the application is completed and signed, please send via email to volunteer@foxislandalliance.org or mail to the address listed on the application.
- You will be contacted within approximately two weeks by the Volunteer Coordinator.
- As a courtesy, please advise your references that they will be contacted by a representative of Fox Island Alliance (FIA).