



THE
SHYANN
KINDNESS PROJECT



Volunteer Application

Thank you for your interest in volunteering with The Shyann Kindness Project, spreading kindness in the Tucson community, and making a positive impact in the lives of the children and families we serve! As a 100% volunteer organization, we value, respect, and appreciate our volunteers. Please complete the information below to begin the application process.

Full Name: _____ Birth date: _____

Address: _____ Cell phone: _____

Home phone: _____ E-mail Address: _____

Emergency Contact Name & Phone Number: _____

Current / Former occupation: _____

Most convenient days/times for you to volunteer _____

1. How did you hear about The Shyann Kindness Project? _____

2. I have previous volunteer experience. *Yes / No* If yes, please list most recent organization, position, and length of service: _____

3. Please describe what most appealed to you about The Shyann Kindness Project when choosing a volunteer opportunity. _____

4. Do you enjoy interacting with children? *Yes / No* If no, please explain. _____

5. As a volunteer, do you get frustrated or annoyed when things don't go as expected or are done differently than you would like? *Yes / No*

If yes, what approach would you take? _____

6. Will volunteer time with The Shyann Kindness Project be to fulfill court-ordered community service?
Yes / No If yes, please explain: _____

7. Have you ever been convicted of a felony or misdemeanor (other than a traffic violation)? *Yes / No*
If yes, please explain, including the year of offense: _____

8. What are the best days/times for you to be contacted via telephone to set up a personal interview?

9. Would you like to provide any additional information to be considered in relation to your application to volunteer with The Shyann Kindness Project? *Yes / No* If yes, please use this space to do so:

10. Please provide two non-related references that have known you for a minimum of one year to be contacted by The Shyann Kindness Project.

Name: _____

Address: _____

Telephone: _____

Capacity known: _____

Years known: _____

I understand that completion of the application process may not result in my being offered a volunteer position, and certify that all information I have provided on this application is true and complete. I also understand that my signature authorizes The Shyann Kindness Project to conduct appropriate screening procedures (including, but not limited to, motor vehicle and background checks) required to consider my application and acceptance as a volunteer. I acknowledge that providing incomplete or untruthful information may result in the rejection of my application or the immediate termination of my volunteer status with The Shyann Kindness Project, if any such discrepancies are identified subsequent to my having been accepted as a volunteer.

Applicant's Printed Name

Applicant's Signature

Date

State & Driver's License # _____

Please mail completed application to: The Shyann Kindness Project, 120 S. Houghton Road #138-237, Tucson, AZ, 85748. (Only scanned applications will be accepted by e-mail.)



BACKGROUND CHECK PERMISSION

Due to the fact that TSKP volunteers interact with children, a basic background check is required of all potential volunteers. At this time the background check includes public records, but is not a credit rating check. If there is an incident, past or pending, that you would like to discuss with the interviewer, please do so. If an incident has occurred, the nature of the incident will be considered. Minor traffic violations, for instance, will not prevent someone from volunteering.

I hereby give The Shyann Kindness Project permission to perform a basic background check on me and have supplied the required information on my application.

Full name, printed

Signature

Date