



## Application for Friends Of The Bing Volunteers

Today's Date: \_\_\_\_\_

### Personal Information

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

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

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

**Why are you interested in volunteering?** \_\_\_\_\_

Age \_\_\_\_\_over 18 \_\_\_\_\_under 18

**Have you ever worked or do you currently work for Friends Of the Bing or the Bing Crosby Theater?** Yes No

**What transportation do you use?** Personal car Bus Walk/bike

### Experience and Education

What is your educational/training background?

Do you have a job? What do you do?

Have you had any previous experience as a volunteer? If so, with what organizations, and what kind of work did you do?

Does your current employer have (check all that apply):  Program for volunteering  
 Donation matching program  Grant preference to organizations where you volunteer

**Your Interests with Friends Of the Bing (FOB)**

How did you learn about FOB?  Website  Employee  Current Volunteer

Other :*Please specify* \_\_\_\_\_

Which opportunities do you wish to further explore:  Ushering  Ticket Scanning  Posters

Information Table Host  Other \_\_\_\_\_

How long can you commit to volunteering?  One time  Occasionally  3-6 months

6 months or more  Other \_\_\_\_\_

What days are you available?  Mondays  Tuesdays  Wednesdays  Thursdays  Fridays

Saturdays  Sundays

What times are you available?  Mornings  Afternoons  Evenings

Hobbies/interests:

Skills you would like to use while volunteering:

Other languages you speak \_\_\_\_\_  Basic  Conversational  Fluent  
\_\_\_\_\_  Basic  Conversational  Fluent

Do you have any special needs or restrictions we should be aware of?:

Date you can begin service:

**Criminal History**

All volunteer positions require a Criminal History check. Conviction will not necessarily disqualify you from participating. Have you ever been convicted of a felony?  Yes  No

If yes, explain.

**Please describe in 3-5 sentences why you want to be a volunteer or intern with Friends Of the Bing:** Why, at this particular time in your life have you chosen to volunteer with us? What do you hope to gain from being a volunteer?

Please share three references below:

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

Affiliation: \_\_\_\_\_ Years you have know each other \_\_\_\_\_

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Affiliation: \_\_\_\_\_ Years you have know each other \_\_\_\_\_

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Affiliation: \_\_\_\_\_ Years you have know each other \_\_\_\_\_

*Friends Of the Bing considers applicants for volunteering without regard to gender, race, age, religion, national origin, sexual orientation or gender identity, veteran or marital status, or any other legally protected status. We provide reasonable accommodation to qualified individuals with disabilities when it would not be an undue hardship. If you need a reasonable accommodation in the pre-placement process, please let us know.*

**AUTHORIZATION AND AGREEMENT BY APPLICANT**

1. I certify that the facts set for in this volunteer application are true and complete to the best of my knowledge. I understand that any false statement, omission or misrepresentation in my application or placement interview may result in the rejection of my application or discharge from the volunteer program.
2. I consent to having Friends Of the Bing complete a criminal background check prior to volunteering.

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Signature (required if less than 18 years of age)

\_\_\_\_\_  
Date