



VOLUNTEER APPLICATION

LAST NAME _____ FIRST NAME _____

ADDRESS _____ CITY _____ ZIP _____

HOME PHONE _____ WORK PHONE _____ EXT _____

CELL PHONE/PAGER _____ EMAIL _____

DATE OF BIRTH _____ GENDER _____ M _____ F _____

HAVE YOU EVER BEEN CONVICTED OF A FELONY? _____ Yes _____ No

HAVE YOU EVER VOLUNTEERED BEFORE? _____ Yes _____ No

ETHNICITY [circle one] Caucasian African-American Latino/Hispanic Asian/Pacific Islander
 Native American Other _____

HIGHEST LEVEL OF EDUCATION COMPLETED [circle one]
 K 1 2 3 4 5 6 7 8 9 10 11 12 HS Diploma 1 2 3 4 Undergraduate Degree ____/____5 6
 Graduate Degree _____ Technical School/Other _____

REFERRED BY [circle one] Court Volunteer Center Parish – Name: _____
 Other _____

HOW DID YOU HEAR ABOUT US? [Circle one] Friend College Radio High School Newspaper TV
 Phone Directory Relative Internet CCEB Newsletter Catholic Voice

CCEB CLIENT: _____ **YES** _____ **NO** **PROGRAM:** _____

CHECK ANY OF THE FOLLOWING THAT APPLY:
 Working Full Time: _____ Part Time: _____ Name of Employer _____
 Self Employed _____ Retired: _____ Student/Name of School _____

IS THERE A PARTICULAR PROGRAM YOU WOULD LIKE TO WORK WITH? (Please circle)
 Administration/Operations Catholic Counseling Service Development Human Resources
 Crisis Response & Support Network VITA Program Immigration Refugee Resettlement
Special Projects such as: Bulk Mailings Special Events Clean ups

WHAT COMMUNITY WOULD YOU LIKE TO WORK?

Alameda County: City _____/Contra Costa County: City _____

WHEN ARE YOU AVAILABLE TO VOLUNTEER?

- M- F Week day's 9am-5pm M-F Week day evening's 5pm-8pm M-F Week days 9am – noon
- M-F Week days 1pm-4pm Saturdays Sundays

PLEASE CHECK SKILLS THAT APPLY:

- Accounting Artist Board Member Carpentry
- Computer Hardware Repair Computer Programming: ___web design ___web management ___database
- Computer Software: ___Word ___ Access ___ Excel ___ PowerPoint ___Desktop publishing ___Typing WPM _____
- Counseling CPR Editing First Aid Graphic Design Grounds keeping/Landscaping
- Management Mediation Music/Singing Nursing/Caregiving Phone Operations
- Photography/Film making Public Relations/ Marketing Teaching Writing
- Written Translation, Language: _____ Other _____

LIST THE LANGUAGES THAT YOU SPEAK:

- Cantonese Chinese English Farsi
- French German Hindi Italian Korean Mandarin
- Pashto
- Punjabi Russian ASL/SEE Spanish Vietnamese Other

APPLICANT'S AGREEMENT

- If I become a volunteer, I understand that my volunteering is terminable at will, either by Catholic Charities of the East Bay (CCEB) or me, regardless of the length of my volunteering.
- I understand if I am selected for a volunteer assignment I will need to provide to additional background information including background check, finger printing or other program specific requirements.
- I give permission for any photograph, video, or audio of myself, obtained during volunteer activities, to be used in informational material and for publicity, training and promotional purposes without compensation for CCEB and/ or its partners.
- I understand that any misrepresentation or omissions on this application may be considered sufficient cause for rejection of this application. By signing this form I agree that the statements and conditions above are true and correct.

Signature

Date

IF UNDER 18, signature of Parent or Legal Guardian required.

Signature of legal Guardian

Print Name

Date

Please submit Volunteer Applications:

Via Email: hr@cceb.org
(preferred method of submittal)

Via Mail:

Catholic Charities of the East Bay
Attn: Human Resources
433 Jefferson Street
Oakland, CA 94607

FOR CCEB USE ONLY: _____INTERN CALWORKS _____SERVICE _____LEADERSHIP
_____REFERENCES REQUIRED _____AUTO INSURANCE & LICENSE PLATE # _____
BACKGROUND INFORMATION _____OTHER _____