**PROJECT SUPPORT SENIOR CENTER
VOLUNTEER INFORMATION SHEET**

**Date**: ­

**Present Street Address and P.O. Box No**:

**Phone Number(s)**:

**Are you 18 years or older**? Yes No

**Have you been charged or convicted of a felony or a Misdemeanor?**  Yes ­ No

**If yes, please explain**:

**What department would you like to volunteer in**?

**Date you can start**: **Are you presently employed**:

**Where are you employed and for how long?**

**How many days, or hours, a week are you available?**

**Do you have experience as a volunteer?**

**How long have you been a volunteer?**

**Special Skills:**

**I certify that all the information submitted by me on this information sheet is true and complete.**

**Signature Date**

**Printed Name**