



FAITH BASED SPORTS & YOUTH SERVICES, Inc.

Counselor/Staff Volunteer Application

Please print

First Name Last Name

Address City/State/Zip

Telephone..... Social Security #.....

Date of Birth..... Emergency Contact Name & Cell:

Personal Information (please circle correct response):

Gender: Male Female

Physical Limitations: No Yes (Please Explain)

Education (highest level completed)

Grades 1-5 6-9 11-12 College Business Graduate School Technical/Vocational

Former work/occupation **Most recent employer (optional)**

Explain why you want to be an FBS Volunteer and any past Volunteer experience

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List previous volunteer experience

Skills (List your Basketball and Other skills that will be an Asset to Our Organization and indicate Years of Experience and proficiency level and or Certifications)

1.....3

2.....4

REFERENCES Name & Cell# (2 Personal and 2 Professional)

1.....3

2.....4

Volunteer availability: (Circle all applicable)

Number of Days available per week: 1 2 3 4 5

Sunday Monday Tuesday Wednesday Thursday Friday No Preference

Transportation: (How you will get to your assignment)

Public Trans. Walk Bus/Van Taxi/Car Svc Personal Car Stay On-Campus

In an emergency, notify:

First Name Last Name

Address

City/State/Zip Telephone

Accommodations and Stipend

Volunteers will be provided room and board, and a one-time \$ _____ stipend for services rendered. Volunteers agree to a Background Check and to serve any client who is assigned regardless of race, sex, creed or Nationality.

X X

(Signature/Volunteer) (Signature/Staff) (Date)