

ELE'S PLACE
Lansing Volunteer Application

Name: _____ E-mail address: _____

Address: _____ City: _____ State: _____ Zip: _____

County: _____ Age (if under 19): _____

Home Ph: _____ Cell Ph: _____ Work Ph: _____

Permanent Address (if different from above): _____

Place of Employment: _____

Please answer the following questions (if more space is needed, attach additional page[s]).

1. Why are you interested in volunteering with Ele's Place?

2. What type of volunteer work are you interested in? Please check one or more of the choices below.
(*Important:* please review the Volunteer Opportunities sheet for the descriptions of and requirements for each option)

Support Group Program-related Volunteer Opportunities:

- Support group facilitator (working with children)
- Support group program helper (assisting with greeting, activity room &/or library)

Other Volunteer Opportunities:

- Helping with special projects (*please check those which are of most interest to you*)
 - Serving as an outreach ambassador of Ele's Place
 - Delivering brochures (as assigned)
 - Assisting with fund-raising events

** If you are not interested in working directly with the Ele's Place support group program, please skip #3-5, and answer #6-7. If you are interested in being a support group facilitator or program helper, please complete all of the questions.*

3. Describe your experiences in working with children:

4. Have you experienced the death of a family member or close friend? How long has it been since the death(s)? Please briefly describe how the person(s) in your life died and how you coped with your experience(s).

5. Do you have clinical certifications or degrees (MSW, LLP or similar)?

If yes, please describe:

6. Have you ever been convicted of any felonies or misdemeanors (other than for a minor traffic offense)?

YES NO

If yes, please explain:

7. Please list previous and current volunteer experiences:

Organization	Type of Volunteer Work	Supervisor	Dates
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I agree to give permission to Ele's Place to contact my volunteer supervisor(s) and I release my supervisor(s) from any liability for supplying information about my performance and suitability as a volunteer.

Signature _____ Date _____

We strive to recruit volunteers that represent the diversity of our community. With this in mind, we would appreciate it if you would provide the following information:

Gender: Male Female

Race/Ethnicity:

Thank you for your interest in being an Ele's Place volunteer!

Please return your completed application to:
Ele's Place, 1145 W. Oakland Ave., Lansing, MI 48915 or fax: (517) 482-6608