



<b>TECHNICAL SKILLS:</b> List experience, responsibilities, skills, other volunteer work, etc.					

<b>EDUCATION</b>					
<b>School</b>	<b>Name &amp; Location</b>	<b>Course of Study</b>	<b># Yrs Completed</b>	<b>Did You Graduate?</b>	<b>Degree or Diploma</b>
<b>Graduate</b>					
<b>College</b>					
<b>Business/ Trade/ Technical</b>					
<b>High School</b>					

Are you a United States Veteran? Yes / No If yes, which branch? \_\_\_\_\_

**PERSONAL DATA:**

Where Did You Hear About Our Volunteer Program?

\_\_\_\_\_

<b>PERSON TO BE NOTIFIED IN CASE OF EMERGENCY:</b>	
<b>Name</b>	<b>Relationship</b>
<b>Address (include full street address,city, state, zip)</b>	<b>Telephone</b> (     )

**DECLARATION:** I declare that all statements contained in this application are true and correct, to the best of my knowledge, and I authorize Brothers of Mercy to make any inquiry to determine my suitability for volunteering, with the understanding that any misrepresentations or omissions made herein will be just and due cause for my discharge from volunteering regardless of when such misrepresentation may be discovered.

I agree to submit to any medical procedures as required by Brothers of Mercy and any applicable regulations. I understand that I may terminate my volunteer status at any time for any reason and that Brothers of Mercy reserves the same right.

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

Signature: \_\_\_\_\_

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

Approved to Volunteer:

\_\_\_\_\_ Date: \_\_\_\_\_  
Volunteer Coordinator or Designee

**Internal Use Only: Do not complete...**

<b>PROFESSIONAL LICENSE, REGISTRATION, CERTIFICATE OR PERMIT (WHERE APPLICABLE)</b>		
<b>Type:</b>	<b>Number:</b>	<b>Issued By:</b>
<b>Expiration Date:</b>	<b>OFFICE USE/Verified By/Date:</b>	

**To Be Completed by Volunteer Coordinator / Human Resources:**

***NYS Aide Registry Check Completed:*** \_\_\_\_\_

***Office of Professionals Check Completed:*** \_\_\_\_\_

***OIG / OMIG x2 Check Completed:*** \_\_\_\_\_

***NYS Dept of Corrections Check Completed:*** \_\_\_\_\_

***Sex Offender Registry Check Completed:*** \_\_\_\_\_