

Personal Information

Volunteer/Intern Name				
Street Address			Workplace/School	
City	State	Zip		Position/Major
Email Address			Re	eferred By
Cell Phone	Home Phone		DOB	

How are you looking to help?

- □ Afterschool Programming
- \Box Mentor

□ Special Events/Projects

Availability (Please check all that apply.) □ Monday □ Tuesday □ Wednesday □ Thursday □ Friday □ Saturdays □ Sundays

Languages Spoken (Please check all that apply.) \Box English \Box Spanish \Box Other:

What interests you most about volunteering at the The Mix at Arbor Place?

Do you have previous experience working or volunteering with youth?

Have you renewed the following background checks within the last year? (Volunteers who come in direct contact with youth are required to present all 3 clearances prior to start date.)

□ FBI Fingerprinting Background Check

□ PA State Police (PATCH) Background Check

 \Box PA Child Abuse History Clearance