Camp Fire Gulf Wind, Inc.
Volunteer Information Form 2018

Name: _____ Phone Number: _____

Address _____
              Street   City   State   Zip Code

E-mail Address: _____ Personal or Work   Occupation: _____

Place of Employment: _____   Business Phone:_____

> If working directly with children, Camp Fire must complete a background check using the following required info:
>
> Social Security #: _____   Date of Birth: _____   DL State/Number: _____

How did you hear about Camp Fire? _____

What days and time are best for you to volunteer? _____

What area of Camp Fire Programs are you interested in? (Check all that apply)
☐ After-School ☐ Child Care ☐ Out of School programs ☐ Summer Day Camp ☐ Teens in Action ☐ Youth Advisory Panel
☐ Community Club ☐ Fundraising   ☐ _____   ☐ _____   ☐ _____   ☐ _____

PREVIOUS JOB/VOLUNTEER-RELATED EXPERIENCE: Please describe position(s) held and general responsibilities.

A. As a Volunteer: _____
_____

B. As a paid employee: _____
_____

C. Education and/or special training (activities, experience, R.N., CPR, etc...): _____
_____

D. Current memberships held: _____

E. Hobbies/Interest/Skills: _____

F. Health limitations or considerations: _____
_____

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G. Please comment on your interest in a leadership position and the contribution you can make to youth through this volunteer role: _____

_____

_____

_____

_____

EMERGENCY CONTACT:

Name: _____ Relationship: _____

Work Phone: _____ Home Phone: _____

REFERENCES: Please give two non-relative references (local if possible):

1. Name: _____ Phone: _____
    Address: _____

2. Name: _____ Phone: _____
    Address: _____

 I understand that a criminal record check will be made of my background and inquiries will be made of my general character.

Have you ever been convicted or adjudicated of any civil or criminal misdemeanors or felonies? ☐YES ☐NO
If yes, please explain: _____

The preceding information is accurate to the best of my knowledge.

_____   _____
Signature   Date

FOR COUNCIL USE ONLY

Resident of: ☐Escambia   ☐Santa Rosa ☐Okaloosa or _____ Nearest Site: _____

Currently a ☐Member ☐non-member of the Gulf Wind Council.

Prospective Supervisor: _____ Interview Date: _____

☐All forms turned in   ☐Copy of Driver's License and Social Security Card attached

☐Given Volunteer Handbook   ☐References checked – Date: _____ By: _____