



NORTH PORT DRUG FREE YOUTH Volunteer Application

Name: _____

Local Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____

E-mail address: _____

Parent of a DFY Member? _____ Name of Child _____

Schedule Information:

Please check the times you are willing to volunteer:

	Sun	Mon	Tues	Wed	Thurs	Fri	Sat
Morning							
Afternoon							
Evening							

Employment & Volunteer History

Employment History

Company Name: _____ Phone: _____

City: _____ State: _____

Length of Employment: _____ From: _____ To: _____

Your Title: _____ Supervisor: _____



Company Name: _____ Phone: _____

City: _____ State: _____

Length of Employment: _____ From: _____ To: _____

Your Title: _____ Supervisor: _____



Company Name: _____ Phone: _____

City: _____ State: _____

Length of Employment: _____ From: _____ To: _____

Your Title: _____ Supervisor: _____



Volunteer Experience

Agency: _____ Duties: _____

Length of Service: _____ From: _____ To: _____



Agency: _____ Duties: _____

Length of Service: _____ From: _____ To: _____



Have you volunteered before? _____ If so, where? _____

References

List names of friends or relatives who are employed or volunteering in North Port:

Name _____ Name: _____



List two references (personal or professional) who know of your abilities and interests:

Name: _____ Phone: _____

Describe your relationship: _____



Name: _____ Phone: _____

Describe your relationship: _____

D-FY Information

How did you hear about *NORTH PORT D-FY*? _____

Have you ever been arrested? _____

If yes, please list the charges and legal outcomes: _____

Volunteer Requirements

The following requirements must be met by NORTH PORT D-FY volunteers:

- Background Check & Fingerprinting
- Negative Drug Test
- Personal References
- Affidavit of Good Moral Character from area Church, Civic, School, or law Enforcement
- Review of D-FY professional boundaries policies
- Review of D-FY confidentiality policies

These items are all covered during the volunteer orientation.

Please sign and date your application:

Applicant Signature

Date

Thank you for your interest in *NORTH PORT D-FY*!