



Volunteer Information Form

Name: _____ Gender: ___M___F

Address: _____

City: _____ State: _____ Zip Code: _____

Mobile Phone: _____ Alternate Phone: _____

Email: _____ Date of Birth: _____

Marital Status: _____ Spouse's Name: _____

Do you have a passport? ___Yes___ No

If you do not have a passport, have you applied for a passport? ___Yes___ No

Citizenship: _____ Nationality: _____

Full Name (*as it appears on passport*): _____

Passport Number: _____ Issuing Country: _____ +___+___+___+___

Date Issued: _____ Expiration Date: _____

Do you hold a current standard drivers license? ___Yes___ No

Do you hold a current commercial drivers license? ___Yes___ No

Do you hold a current professional license? (*i.e. contractor, electrician, engineer, etc.*) ___Yes___ No

If yes, in what area(s)? _____

Do you hold a current medical certification/ license? ___Yes___ No

If yes, in what area(s)? _____

NOTE: If you answered yes to any of the above questions, please submit copies of the valid license(s)/ certification(s) along with this form.

Please check whether you have basic working knowledge or if you are skilled in the following:

	Working Knowledge	Skilled		Working Knowledge	Skilled
Carpentry, framing			General Building Repairs		
Carpentry, finish			Welding		
Mason, block			Heavy equipment operator		
Mason, brick			Painting		
Concrete work			Roofing		
Electrician			Cabinet, builder		
Heating/Air			Cabinet, installation		
Plumbing			Vinyl siding, installation		
Drywall, installation			Landscaping		
Drywall, finisher			Metal building, construction		
Tile, inlay			Truck driver, semi		
Tile, ceramic			Truck driver, dump		
Carpet, installation					

Please elaborate on any additional skills/abilities you possess: _____

I hereby certify that this information is accurate. Should any changes occur, I will notify the Men and Women of Action office.

Name (printed): _____ Date: _____

Signature: _____

Parent or Guardian Signature (if under age 18): _____