

**THE UNIVERSITY OF HAWAII  
VOLUNTEER APPLICATION FORM**

**Project Name:**        **STRIDE Mentoring Project**

Date of Application: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone:(Residence) \_\_\_\_\_ (Work) \_\_\_\_\_

Best Time to Contact: \_\_\_\_\_

Briefly explain your interest in becoming a volunteer with our program:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Education/Training & Specialized Skills: (Proof required if related to job safety)

\_\_\_ High School        \_\_\_ College        \_\_\_ Graduate School  
Degree(s): \_\_\_\_\_

Certification(s): \_\_\_ Basic First Aid \_\_\_ CPR        \_\_\_ Driver's License        (\_\_\_Type)  
                         \_\_\_ Other(specify) \_\_\_\_\_

Specialized or Computer Skills: Describe any specialized skills (art, writing, computer, software language, foreign language, etc.): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Employment:

Current Employee: \_\_\_\_\_ Job Title: \_\_\_\_\_

Name & Telephone Number of Supervisor: \_\_\_\_\_

If presently employed, how many hours do you work per week? \_\_\_\_\_

Volunteer Experience:

Briefly describe any volunteer experience you have performed. Identify agency, type of work, and dates of volunteer service: \_\_\_\_\_  
\_\_\_\_\_

Available Schedule to Perform Volunteer Duties: \_\_\_\_\_

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Days/Times: \_\_\_\_\_

How did you learn about the Project's Volunteer Program? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

In case of emergency, who should we notify:

Name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Phone: \_\_\_\_\_

**PLEASE READ CAREFULLY AND SIGN:**

*I certify that the information provided on this volunteer Application Form is true and accurate. I am authorizing the Project to contact my former and my current employer for a reference. I have read the Project's Mentor and Mentor-in-training application information and attended a STRIDE Mentoring Orientation. If selected, I will comply with all requirements specified by my supervisor. I fully understand what is expected of me if I am selected for this volunteer program. Any misrepresentations provided on this form may result in my immediate dismissal from the program.*

\_\_\_\_\_  
*Signature of Applicant*

\_\_\_\_\_  
*Date*

<i>For Internal Use Only:</i>	
Date Interviewed: _____	Reference Check: _____
Selected: _____	Not Selected: _____
_____ Date: _____	
Principal Investigator or Project Coordinator	
Authorized by: _____	Date: _____
Social Science Research Institute	