

RAINBOWS

UNITED, INC.

bringing potential to life

Volunteer Application

Please return to Volunteer Coordinator
Rainbows United, Inc.
340 S. Broadway
Wichita, KS 67202

Date _____

Name _____ Age _____ Birthdate _____ S.S.# _____

Current Address _____ City _____ State _____ Zip _____

Permanent Address _____ City _____ State _____ Zip _____

Phone Number (H) _____ (W) _____ (cell) _____

e-mail _____

Educational Background

Middle/High School/College _____

Course of Study/Degrees Earned _____

Special Skills/Training/Courses (e.g. foreign language, early childhood, etc.) _____

Employment

Occupation _____

Employer _____

How did you hear about and become interested in volunteering for Rainbows United? _____

Please list any previous volunteer experience _____

Previous experience with children (if any) _____

Relevant work experience _____

Rainbows United, Inc. has numerous ways in which interested persons can help the agency meet the needs of children and families. The following list is just a sampling of the many volunteer opportunities available. The Volunteer Coordinator will visit with you after you have completed the written application to identify your interests and match with agency needs.

- Working directly with children in group setting
- Assisting with clerical tasks
- Helping with field trips, class parties, or other special events
- Constructing or repairing equipment
- Sewing, gardening, cleaning, odd jobs, etc.

Availability (Please list times you are available to volunteer in spaces provided.)

Monday _____ Tuesday _____ Wednesday _____ Thursday _____ Friday _____
Saturday _____ Sunday _____

Date available to begin _____ **Length of commitment** _____

Comments _____

Have you ever been convicted of a felony? Yes _____ No _____

If so, please explain the circumstances _____

References

Please list three complete references with no more than one being a relative.

1. _____
(Last Name) (First Name) (Middle) (Relationship) (Phone #)

(Address) (City) (State) (Zip)

2. _____
(Last Name) (First Name) (Middle) (Relationship) (Phone #)

(Address) (City) (State) (Zip)

3. _____
(Last Name) (First Name) (Middle) (Relationship) (Phone #)

(Address) (City) (State) (Zip)

All responses given are true and correct. I understand that any omissions of fact or any false or misleading statements will be considered just cause for immediate dismissal, no matter when discovered. I further understand there may be no positions currently available.

I give RUI the right to investigate all references and to secure additional information about me, if job related. I hereby release from liability the employer and representative for seeking such information and all other persons, corporations or organizations for furnishing such information.

I understand if I am offered volunteer employment, I am not required to furnish any information which is prohibited by federal, state or local law, and that I may request reasonable accommodations, if needed due to disability, in order to participate in the overall application process. I understand I will be required to successfully obtain a pre-employment health assessment and TB test. I will also provide such documents as required by "The Immigration Reform and Control Act of 1986."

This application is current for one year. At the conclusion of this time, if I still wish to be considered for volunteer employment, it will be necessary to complete a new application.

I understand that I am free to resign at any time and RUI reserves the right to terminate my volunteer employment at any time, with or without cause and without prior notice. I understand that no representative of the employer has the right to make any assurances to the contrary.

Applicant's Signature

Date

We appreciate your interest in Rainbows United, Inc. We are an equal opportunity employer and do not discriminate on the basis of race, color, religion, sex, national origin, age, disability, or veteran status as provided by law.

SMOKE-FREE AND DRUG-FREE WORKPLACE