



Mental Wellness Starts With Friendship

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Volunteer Application

Name: _____	Birth Date: _____	
Address: _____		
Phone: Home: _____	Work: _____	Best time to call: _____
E-mail address: _____		
Race: _____	Religion: _____	Marital Status: _____
Gender: _____	Do you have use of a car? _____	

Is it important to you that your Compeer friend is of a specific age, religion, ethnic background? If so, Please specify: _____
<u>Please note: The policy of Compeer is to match volunteer and friend of the same gender.</u>
Do you smoke? _____ Do you mind if your friend smokes? _____
Do you have any medical or psychological conditions that affect your health or daily functioning? If yes, specify: _____ _____

Education/training: _____
Occupation: _____
Employment History (If this does not apply, please provide an additional personal reference)
Employer: _____
Address: _____
Email Address: _____
Supervisor's Name: _____



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Personal reference (The reference cannot be a relative and must have known you for at least one year.)

Name: _____

Address: _____

Email Address: _____

Phone number: _____ How long have you known this person? _____

Background Information

Birthplace City and State: _____

Current Driver's License #: _____

Auto insurance Agency: _____

Has your license ever been suspended? _____ Explain: _____

Have you ever been convicted of a crime? (Except minor traffic violations) _____

If yes, give date and nature of charge and conviction: _____

Are there any misdemeanor/felony charges pending against you now? _____

If yes, please give nature of the charge: _____

Social Security Number (for criminal background check): _____

Your completion of this form is appreciated. Compeer screens volunteers carefully. A "yes" to any question does not necessarily disqualify you from becoming a Compeer friend.

I certify that the above information is accurate and give Compeer permission to verify this information with the appropriate agency. As a volunteer, I will help my Compeer friend to the best of my abilities in accordance with the policies of Compeer and will maintain complete confidentiality concerning all information about my friend. I understand that this application and interview does not obligate me to accept, or for Compeer Lancaster to assign, a volunteer opportunity.

Signed: _____ Date _____