

Sunnybrook Children's Home

Volunteer Application

NAME: _____

ADDRESS: _____ How Long? _____ yrs.

CITY: _____ STATE: _____ ZIP: _____

List Occupation: _____ Employer Name: _____

PHONE (H): (____) - _____ - _____ (W): (____) - _____ - _____

SPOUSE'S NAME (if applicable): _____

Do you have children living at home? Yes No (if "Yes," list name, ages & sex below)

Name: _____ Age: _____ Sex: _____

Name: _____ Age: _____ Sex: _____

Do you have a valid MS driver's license? Yes No Do you have proof of auto liability insurance? Y N

Any physical or mental disabilities which may prevent you from providing for the child's basic needs? Yes No
(if "yes," please explain) _____

List church affiliation: _____

List special skills, hobbies, interests: _____

PERSONAL REFERENCES

NOTE: TO EXPEDITE THE PROCESSING OF YOUR APPLICATION, FOUR (4) REFERENCES ARE REQUIRED & MUST BE SUBMITTED WITH THIS APPLICATION.

PLEASE PLACE A CHECK INDICATING THE WAYS YOU WOULD LIKE TO VOLUNTEER:

- Providing monthly support for a child or a cottage - \$ _____
- Purchasing clothing for children
- Providing your talents & abilities during special events, projects, etc... at Sunnybrook
- Buying children birthday, Christmas gifts
- Hosting children in your home (i.e. overnight or day visits)
- Paying for summer camp or various summer trips
- Offsetting school related expenses (i.e. School supplies, pictures, athletic supplies)
- Other: _____

