

Please list two references (do not include relatives)

1. Name _____
Address _____
Phone Number _____ Alternate Number _____

2. Name _____
Address _____
Phone Number _____ Alternate Number _____

VOLUNTEER OPPORTUNITIES

Please circle the activities that interest you and specify your top area of interest.

Chapter Assistance

Special Events Fund Raising Data Entry General Office Assistance
Information/Health Fairs Blood Drives

Emergency Services

Disaster Action Team (responds to local disaster) Armed Forces Emergency Svcs. Canteens
CDL Driver Community Dis. Ed. (CDE) National Disaster Relief

Health and Safety

CPR/FA Instructors Water Safety Instructors Pet First Aid Instructors
Babysitter Instructors Blood Pressure Clinics First Aid Stations

Participation requires a criminal and child abuse background check

I certify that the information given herein is true and correct to the best of my knowledge and belief.

Signature of Applicant _____ **Date** _____

Interviewer's Appraisal and Comments:

(Skills, knowledge, ability, aptitudes, traits or interests. Previous Red Cross training, recognition or volunteer background.)

Interviewer _____ Reviewer _____

Department _____ Basic Orientation Date _____