



Erin Kimball Foundation

Housing • Options • Mentoring • Empowerment

Volunteer Application

Applicant Information

Full Name: _____ DOB: _____ Gender: _____

Address: _____
Last First MI

Street Address Apartment/Unit #

City State Zip code

Phone: () _____ Email Address: _____

Have you ever been charged or convicted of _____ Are you willing to be contacted via group email?

a felony? YES NO

YES NO

If yes, explain: _____

Background Clearance Information

If working directly with participants, are you willing to be fingerprinted and undergo a background check?

Have you lived in the state of Utah for the last 10 consecutive years? If not, in what other states or countries have you lived?

Would you like to make a donation towards the cost of the background check? YES NO

Other Information About You

Please share why you would like to volunteer for the foundation. What would you most like to do or what do you enjoy doing?

Have you volunteered before, if so, where?

How many hours would you be willing to volunteer?

When are you available for a 1-2 hour orientation?

Signature: _____ Date: _____