

Mail to:
Southeast Lake County Faith in Action Volunteers
2789 Oak Street
Highland Park, Illinois 60035

Questions:
(847) 433-9411
faithinaction.boudreau@gmail.com



Personal information:

Name: _____ Birthday: _____
Phone (H): _____ (C): _____
(W): _____
Address: _____ Email: _____
Congregation affiliation (optional): _____
Occupation: _____ School District (optional) _____

Volunteer options:

___ transportation ___ shopping/errands ___ friendly visits ___ light housework
___ writing letters ___ reading ___ handyman work ___ outdoor chores
___ respite care ___ telephone reassurance ___ meal prep other: _____

Placement preference:

Please check all that apply:

I can volunteer: ___ once a week ___ more than once a week ___ as needed ___ other

Time/Day	Mon.	Tues.	Wed.	Thurs.	Fri.	Sat.	Sun
Morning							
Afternoon							

Please place an "x" on preferred days/times for volunteer service

Matching information:

General interests, skills, volunteer experience, languages, and hobbies: _____

Do you smoke? ___yes ___no

Are you allergic to pets? ___yes ___no

I prefer to volunteer (choose all that apply):

___ private residence ___ rehab center of nursing home ___ wherever needed
___ Deerfield only ___ Highland Park only ___ anywhere within 5 mile radius

List any special considerations for your placement (preference for age or gender of care receiver)? _____

Are you interested in forming a Care Team in which 2 or more people share an on-going assignment? _____ Are there specific people who you'd like to pair with?

Screening information:

Do you have a valid driver's license? ___yes ___no

License number: _____

Car Insurance company: _____ Policy number: _____

Have you ever been convicted for violation of any laws, traffic or otherwise? ___yes ___no

If yes, please explain: _____

Do you have any physical condition that may limit your volunteer activities? ___yes ___no

If yes, please describe: _____

Emergency contact:

Name: _____ Phone: _____ Relation: _____

References:

Please list two persons we may contact who are not family members. You may include employers, teachers, religious leaders, school organizations, social clubs or others whose relationship to you is more than a personal friend.

Name: _____ Phone: _____ Relation: _____

Address: _____

Name: _____ Phone: _____ Relation: _____

Address: _____

I hereby give my consent for Southeast Lake County Faith in Action Volunteers to contact my references: to contact my employers, past and present; and to conduct a routine background check.

Signature of Applicant

Date

Social Security Number