



Application for Volunteer Services
Peak Community Services, Inc.

Position Applied For: _____

PERSONAL INFORMATION

Name:	Social Security:
Street:	Home Phone:
City:	Other Phone:
State:	Zip:

SPECIAL SKILLS OR TRAINING (Applicable to Application)

Do you have relatives who have worked for Peak Community Services? Yes No

MOST RECENT OR CURRENT EMPLOYER

From:	To:	Duties:
Job Title:		
Supervisor:		
Employer:		
City:	State:	

May we contact the above employer? Yes No Telephone: _____

List any days / hours you are unable to work: _____

Previous experience with persons with disabilities: _____

Are you a US citizen or do you have a valid visa? Yes No

Have you entered a plea of guilty or no contest - or have you been convicted of or have charges pending - of a felony or a misdemeanor? Yes No

Do you have a conviction or prior history of child or client abuse, neglect or mistreatment? Yes No

Please list all addresses you have used in the last three (3) years:

PERSONAL REFERENCES (No more than one may be a relative.)

Name	Address	Relationship	Telephone

List only people we may contact (be sure to include a telephone number).



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Applicant: Read and Sign Below (if you are emailing this application, you will be asked to sign it before you will be interviewed). I authorize the investigation of the statements made on this application and any other signed authorizations as may be necessary in making an employment decision. I hereby acknowledge that any employment relationship is of an "at will" nature. That is, if employed by the agency, I may resign at any time and the agency may terminate my employment at any time, with or without cause. I understand that material misleading information on this application or in the interview process may result in discharge. I also understand that, if hired, I will be required to abide by all rules and regulations of the agency. Peak Community Services, Inc. is an Equal Opportunity Employer.

Signature: _____ Date: _____

INTERVIEWED BY: _____ Date: _____

RELEASE FORM

I, _____, give my permission to Peak Community Services, Inc. (dba Woodlawn Center and Pulaski Developmental Services) to conduct a background check in the following areas for possible employment:

- CNA Registration
- Bureau of Motor Vehicles for Driving Record
- Local County Law Enforcement Agencies to check Background Records
- State Police Report to check Background Records
- Sex Offender Registry for Background Check
- Reference Checks (two Employment; three Personal)

I understand this information will be maintained in my confidential personnel file, and where necessary may be released as required by law.

(If you are emailing this application, you will be asked to sign it before you will be interviewed.)

Signed

Date of Birth

Date Signed

Social Security Number

Driver's License Number