

Short Term Volunteer Application - Adult

Title: **Mr.** **Mrs.** **Miss** **Ms.**

Gender: Male Female

First Name: _____ **Surname/Family Name:** _____

Middle Name: **Nickname(s):**

Street Address: _____ **City/State(Province/Country):** _____

Zip Code: _____ **Email:** _____

Home Phone: _____ **Cell Phone:** _____

Birthdate:

Registered Bahá'í: **Yes** **No**

If yes, ID#:

Proposed Service Term: From: _____ **To:** _____

Do you have health insurance coverage? **Yes** **No**

Insurance Company:

Policy Number:

ALL VOLUNTEERS ARE RESPONSIBLE FOR THEIR OWN MEDICAL COSTS

**Do you have any medical or other conditions that might impact your ability to serve?
If so, please describe:**

[Please also note that the School is a smoke-free and tobacco-free campus.]

Emergency Contacts

Name: _____ Name: _____

Street Address:

City,State(Province):

Home Phone:

Work Phone:

Cell Phone: _____ **Cell Phone:** _____

References

Volunteers are required to provide two references: 1) a non-family member who is personally acquainted with the applicant (provide information below) and 2) a Bahá'í serving in an administrative capacity (ask them to return the attached Short Term Volunteer Reference form directly to Green Acre at greenacre@usbnc.org).

Reference Name:

City, State(Province):

Home Phone:

Cell Phone:

Work Phone:

Email:

Other Email:

Bahá'í Experience:

Describe your experience as a Bahá'í including the communities in which you have lived, committees and Assemblies of which you have been a member, institute programs and/or classes you have attended or taught, conferences attended, pioneering, teaching activities, children's classes taught, home visits completed, etc. Please include dates if known: