



# Wounded Wings: Association for the Betterment of Women and Young Adults Volunteer Application

Date Available \_\_\_\_\_

Areas of interest: \_\_\_\_\_

Last name	First name	Middle	
Home address	City	State	Zip
Telephone number			

### Related Employment Experience

Employed to:	Employer name:
	Employed from:
	Job duties:
	Employer name:
Employed to:	Employed from:
	Job duties:

### Specialized Skills or Interests

### Education

Name of facility	Location	Year of completion

Education
High-school
College
Other training/education

### Availability

Tue.	Wed	Thu	Fri.	Sat	Sun	Mon.

All employees and volunteers may have to submit to a drug screening as well as a criminal background check.

Findings of criminal activity related to the position applied for or showing illegal and/or excessive drug use will result in immediate withdrawal of any and all job offers made to that individual. Findings of criminal activity related to your position for or showing illegal and/or excessive drug use at any time, will result in immediate termination of employment. We will hold the right to enforce a mandatory drug test randomly as well as view your criminal history through out your employment.

I authorize Wounded Wings to conduct a criminal back ground check for me:

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Signature

Date

Date of Birth

My signature below signifies all information I have provided is true. Providing any false or misleading information will prevent me from being hired by the company. Any falsified information found after hiring will result in immediate termination. I understand Wounded Wings is an equal opportunity employer. I have read and understand the policy on drug screening and criminal background checks and understand my date of birth are used only for this purpose. I understand Wounded Wings is an equal opportunity employer.

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Signature

Date