



VOLUNTEER APPLICATION

There are multiple ways of volunteering with us! From supporting our training and youth workshops, to supporting us in the office, all skills are welcome. We do ask that volunteers complete a 40-hour Basic Mediation training prior to starting their service.

Answers to the following questions will give us a better idea of your interests so that we can pair you with the experiences that will be most enriching to you. All of the information is kept confidential.

NAME		BIRTHDAY:
ADRESS		
PHONE(S) & BEST TIMES TO REACH YOU		
EMAIL		

Tell us a little bit about yourself. Feel free to attach your resume (work/ educational background):

List any skills you may have that you think may be valuable to the DRC?

Languages:

English: Speak Read Write

Other: _____ Speak Read Write

Why are you interested in volunteering with us?

Have you ever been convicted of a felony?

How much time can you commit to working with the DRC?

What days and hours would you prefer?

Which of these areas interest you?

- | | | |
|---|---|---|
| <input type="checkbox"/> Phone | <input type="checkbox"/> Graphic Design | <input type="checkbox"/> Workshop/ Training Support |
| <input type="checkbox"/> Computer Work | <input type="checkbox"/> IT | <input type="checkbox"/> Other: |
| <input type="checkbox"/> Clerical | <input type="checkbox"/> Grant Writing | <input type="checkbox"/> Other: |
| <input type="checkbox"/> Communications | <input type="checkbox"/> Volunteer Coordination | <input type="checkbox"/> Other: |
| <input type="checkbox"/> Marketing | <input type="checkbox"/> Legal | <input type="checkbox"/> Other: |

Please list two references (other than a relative)

Name	Relationship	Phone

Person to call in case of emergency:

Name	Relationship	Phone

Address	City	Zip

Volunteer's Signature*

Date of Application

* Signing this verifies your permission to the Dispute Resolution Center of Grays Harbor & Pacific Counties to perform a background check.