

## High Voltage Youth Camp Volunteer Application

Thank you for your interest in volunteering with High Voltage Youth Camp.  
All information on this application will be kept strictly confidential and will only be used in the  
management of the High Voltage Youth Camp.

NAME: \_\_\_\_\_

Title            First            Middle            Last            Nickname

HOME ADDRESS: \_\_\_\_\_

Street            City            State            Zip

HOME PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

PLACE OF EMPLOYMENT: \_\_\_\_\_

FROM: \_\_\_\_\_ TO \_\_\_\_\_

TYPE OF BUSINESS: \_\_\_\_\_ JOB TITLE: \_\_\_\_\_

WORK PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

PREVIOUS EMPLOYER: \_\_\_\_\_ HOW LONG?: \_\_\_\_\_

ARE YOU A STUDENT? Yes \_\_\_\_\_ No \_\_\_\_\_ IF SO WHERE? \_\_\_\_\_

EMERGENCY CONTACT \_\_\_\_\_ PHONE: \_\_\_\_\_

Relationship \_\_\_\_\_

YOUR EDUCATION: please write-in number of years you attended:

High School or equivalent: \_\_\_\_\_ College \_\_\_\_\_ Graduate School

\_\_\_\_\_ Doctorate \_\_\_\_\_ Other \_\_\_\_\_

DEGREE OR TRADE OBTAINED: \_\_\_\_\_

### AVAILABILITY

PLEASE LIST THE HOURS YOU ARE AVAILABLE TO VOLUNTEER:

Monday \_\_\_\_\_ Friday \_\_\_\_\_

Tuesday \_\_\_\_\_ Saturday \_\_\_\_\_

Wednesday \_\_\_\_\_ Sunday \_\_\_\_\_

Thursday \_\_\_\_\_

Comments: \_\_\_\_\_

If you are requesting to do a student internship with us, please specify the number of hours required:

\_\_\_\_\_.

Please list any special interests, hobbies, etc.:

\_\_\_\_\_

Do you speak of foreign language? Yes\_\_\_\_\_ No\_\_\_\_\_ Please be specific:\_\_\_\_\_

Do you know American Sign Language? Yes\_\_\_\_\_ No\_\_\_\_\_ -

Do you have a valid driver's license? Yes\_\_\_\_\_ No\_\_\_\_\_ License # \_\_\_\_\_  
State of license \_\_\_\_\_

Why are you interested in volunteering with High Voltage Youth Camp at this time?

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Have you ever volunteering in the past? Yes\_\_\_\_\_ No\_\_\_\_\_

If yes, please describe your favorite and least favorite experience and what you liked/disliked about each:

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How can we make sure your volunteer experience remains meaningful?

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Is there any other information about yourself you would like to share?\_\_\_\_\_

Please list three people who you have known for 3 or more years who would be willing to serve as personal references (No relatives, please):

Name:\_\_\_\_\_

Phone Number:\_\_\_\_\_ Email:\_\_\_\_\_

Relationship:\_\_\_\_\_ How long have they known you?\_\_\_\_\_

Name:\_\_\_\_\_

Phone Number:\_\_\_\_\_ Email:\_\_\_\_\_

Relationship:\_\_\_\_\_ How long have they known you?\_\_\_\_\_

Name:\_\_\_\_\_

Phone Number:\_\_\_\_\_ Email:\_\_\_\_\_

Relationship:\_\_\_\_\_ How long have they known you?\_\_\_\_\_

I hereby certify the information given in this application to be true and to the best of my knowledge. I understand that the information on this application is subject to verification. I authorize a release of information concerning my character, employment history, criminal history and suitability to work with children. I hereby release from all liability and damages both High Voltage Youth Camp and those individuals or companies who provide such information.

Signature:\_\_\_\_\_ Date:\_\_\_\_\_

**Please return completed application to:**  
**High Voltage Youth Camp**  
**P. O. Box 4224**  
**New Orleans, LA 70185**