

Type of Volunteer Work

- Individual Group
- General Relief Court Ordered Community Service
- Special Events Donation Drive (Clothing, Hygiene Supplies, Food)
- Fund Raising Web-based Fund Raising

Internships

- CAADAC
Certification Program (School or institution) _____
Program Contact _____ Phone _____
- CAAR
Certification Program (School or institution) _____
Program Contact _____ Phone _____
- Other Certification Program _____
Certification Program (School or institution) _____
Program Contact _____ Phone _____

Please list two references other than relatives:

- | | |
|--------------------|--------------------|
| Name _____ | Name _____ |
| Phone _____ | Phone _____ |
| Relationship _____ | Relationship _____ |
| How Long _____ | How Long _____ |

I certify that all statements I have made on my application are true and correct and I hereby authorize Alpha Project to investigate the accuracy of this information. I understand that I am working at all times on a voluntary basis, without monetary compensation or benefits, and not as a paid employee. As an Alpha Project volunteer, I give Alpha Project permission to use any photographs or videos made of me during my service without obligation or compensation to me. I understand that Alpha Project reserves the right to cease a volunteer's services at any time.

Signature _____ **Date** ____/____/____

OFFICE USE ONLY

Comments: