

Non-Affiliated Pre-Screened Volunteer Application

Last Name	First Name	Middle Initial									
Home Address	City	State	Zip Code								
Home Phone	Cell Phone	Email Address									
Birth Date ____/____/____		Social Security Number ____/____/____									
<i>All information will be kept confidential and is required for background checks only</i>											
Work Experience: Please list most recent employer and duties.											
Current License(s)/Certifications:											
Type:	Number:	State:	Exp. Date:								
Type: Drivers License											
Education and Training: List information related to licensure.											
Institution(s) Name:	City/State(s):	Degree Major(s):	Date(s) Attended:								
Languages Spoken:											
Geographic Availability: Please check all of the boxes of the places you would be willing to volunteer:											
My County <input type="checkbox"/>	Multiple Counties <input type="checkbox"/>	State Wide <input type="checkbox"/>	Nation/World Wide <input type="checkbox"/>								
Availability: Circle the Days and Times Available											
ALL DAYS	M	T	W	TH	F	Sat.	Sun.	ANYTIME	Morning	Afternoon	Evening
Emergency Contact Information:											
Name	Relationship	Address	Phone								
Personal Information:										YES	NO
Are you licensed to operate a motor vehicle in this state?											
Have you ever been convicted of a felony? If yes please explain.											
Past 24 months have you been convicted of a Misdemeanor that required Jail Time? If yes please explain.											
For Office Use Only: Reviewed by						Date:					

Please return completed form to:
 Adair County Health Department Administrator
 1001 South Franklin Street
 Kirksville, MO 63501
 (660) 665-8491
Jim.LeBaron@lpha.mo.gov

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07/19/2019

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Please (v) the following special skills or experience you possess:

Community Citizen Wishing to Volunteer during an Emergency/disaster

EMT

Paramedic

LPN

RN

Nursing Aide

Therapy

Public Relations

Public Health

Communications (Media)

Faith Based

HAM radio

Electrical

Management/business

Office Clerk/telephone/computer

Data entry

Law enforcement

Fire/First Responder

Driver/MO CDL A or B

Other: _____

Other: _____

Other: _____

Other: _____