



Administrative Office  
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F: 603.772.4917

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64 Epping Road  
Exeter, NH 03833  
P: 603.772.4132  
F: 603.772.5962

Newmarket Center  
3 Simons Lane  
Newmarket, NH 03857  
P: 603.659.2324  
F: 603.659.6882

Pease Center  
81 New Hampshire Avenue  
Portsmouth, NH 03801  
P: 603.766.5437  
F: 603.766.5439

## VOLUNTEER APPLICATION

NAME \_\_\_\_\_ SOCIAL SECURITY# \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

WHAT DAY(S) AND OR TIME(S) ARE YOU AVAILABLE TO VOLUNTEER? \_\_\_\_\_

HAVE YOU EVER BEEN CONVICTED OF A CRIME? \_\_\_\_\_ IF SO, PLEASE GIVE  
BACKGROUND INFORMATION \_\_\_\_\_

### EDUCATIONAL BACKGROUND INFORMATION

HIGH SCHOOL \_\_\_\_\_

YEARS COMPLETED \_\_\_\_\_ YEAR GRADUATED \_\_\_\_\_

COLLEGE \_\_\_\_\_

YEARS COMPLETED \_\_\_\_\_ YEAR GRADUATED \_\_\_\_\_ DEGREE \_\_\_\_\_

OTHER \_\_\_\_\_

### REFERENCES (PLEASE LIST THREE--NO RELATIVES, PLEASE)

NAME \_\_\_\_\_ PHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_ OCCUPATION \_\_\_\_\_

NAME \_\_\_\_\_ PHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_ OCCUPATION \_\_\_\_\_

NAME \_\_\_\_\_ PHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_ OCCUPATION \_\_\_\_\_

IN CASE OF EMERGENCY, PLEASE NOTIFY \_\_\_\_\_  
ADDRESS \_\_\_\_\_  
RELATIONSHIP \_\_\_\_\_ PHONE \_\_\_\_\_

I AUTHORIZE GREAT BAY KIDS' COMPANY TO INQUIRE AS TO MY RECORD FROM ANY AND ALL PERSONS LISTED ON THIS APPLICATION. IF SELECTED AS A VOLUNTEER FOR THE AGENCY, I AGREE TO COMPLY WITH ALL RULES AND REGULATIONS OF THE AGENCY AND TO CALL THE AGENCY IF I AM UNABLE TO FULFILL MY OBLIGATION ON ANY GIVEN DAY.

\_\_\_\_\_  
APPLICANT'S SIGNATURE DATE

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CENTER ASSIGNED TO: \_\_\_\_\_  
ROOM ASSIGNED TO: \_\_\_\_\_  
DAY(S) AND TIME VOLUNTEER WILL ATTEND PROGRAM \_\_\_\_\_  
ADDITIONAL COMMENTS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_